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PROGRAMME DEVELOPMENT IN THE AMERICAS AND CARIBBEAN REGION

The present document provides an overview of UNICEF programme co-operation in the Americas and Caribbean region during 1989.

The UNICEF regional office for the Americas and Caribbean has responsibility for co-operation in the following countries and territories: Anguilla, Antigua and Barbuda, Argentina, Barbados, Belize, Bolivia, Brazil, British Virgin Islands, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Montserrat, Nicaragua, Panama, Paraguay, Peru, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, Turks and Caicos Islands, Uruguay and Venezuela.

CONTENTS

	<u>Paragraphs</u>	<u>Page</u>
INTRODUCTION	1 - 8	4
I. OVERVIEW OF THE REGION	9 - 25	5
A. The region in the 1980s: a complex legacy	9 - 16	5
B. Positive signs for the future of children and women in the region	17 - 20	7
C. Adjustment with a human face	21	8
D. Innovative social intervention methodologies	22 - 23	8
E. Strategies for children in the 1990s	24	9
F. The response of UNICEF	25	9
II. OVERVIEW OF PROGRAMME ACTIVITIES IN 1989	26 - 65	9
A. Child survival and development	26 - 36	9
B. Water and sanitation	37 - 38	12
C. Early childhood development	39 - 40	13
D. Basic education	41 - 43	13
E. Women in development	44 - 47	14
F. Children in especially difficult circumstances	48 - 52	15
G. Urban basic services	53 - 56	16
H. Special Adjustment Facility for Latin America and the Caribbean	57 - 59	17
I. Social communication and mobilization	60 - 62	18
J. Programming, monitoring and evaluation	63 - 65	19
III. PROGRAMME MANAGEMENT AND OPERATIONS	66 - 71	20
IV. EXTERNAL RELATIONS	72 - 79	21
A. Partnership and alliances	72 - 74	21

CONTENTS (continued)

	<u>Paragraphs</u>	<u>Page</u>
B. Information and media network	75 - 77	22
C. Draft Convention on the Rights of the Child	78 - 79	22
V. OTHER SUPPORTING ACTIONS	80 - 86	23
A. Fund-raising	80 - 82	23
B. Inter-agency co-operation	83 - 85	24
C. Technical co-operation among developing countries	86	25
VI. LOOKING TO THE FUTURE	87 - 98	25

INTRODUCTION

1. The present report provides an overview of the socio-economic and political circumstances that characterized the 1980s and the response of UNICEF to the problems of children. The report ends with a perspective on the challenges that UNICEF will face during the 1990s, describing briefly the strategies and priority areas of work to be undertaken. The 1980s in the Americas and Caribbean region was a decade of unparalleled crisis, growing impoverishment and external indebtedness. These phenomena have led to social conflict, confrontation, violence and a decline in indicators for health, nutrition, education, housing and the environment.
2. In terms of UNICEF work, the decade witnessed the transfer of the regional office to Bogotá and the consolidation of the regional concept. This implied cohesive thinking with respect to political, economic and social issues and a consistent approach to action. Another important development during the period was the emergence of the subregional concept which permitted more focused approaches to subregional problems and a corresponding programme response. UNICEF mobilized allies and secured funding for programmes while consolidating various subregions: the English-speaking Caribbean; Central America and Panama; the Andean subregion; and the southern cone countries. These country groupings allow a more effective response to the challenges facing UNICEF.
3. UNICEF grew during the period, establishing sub-offices in the Dominican Republic, El Salvador, Honduras and Nicaragua; liaison offices in Argentina, Belize, Costa Rica, Panama, Paraguay and Venezuela; and outposted offices in Brazil, at Bahia, São Luis de Maranhã and Recife. Sub-offices were upgraded to full office status in Bolivia, Ecuador and Haiti. This process should continue if UNICEF is to respond with greater efficiency to the magnitude of children's needs and corresponding government interest.
4. A dominant aspect of UNICEF work is the mobilization of allies in improving the quality of life of poor children. The 1984 Colombian vaccination campaign, led by President Belisario Betancourt, and the social mobilization it generated initiated a new way of doing things in the region - regarding not only immunization, but all activities designed to meet children's needs. The vaccination campaign has served as a model for expanding social mobilization activities throughout the region.
5. Advocacy for children has included dialogue with heads of State or prime ministers in virtually all countries of the region. These efforts have generated a positive response from leaders who have emphasized the social significance of children in their political platforms despite adjustment measures that Governments have undertaken to meet external debt obligations. Advocacy also has led to the formulation of concrete proposals benefiting poor children and families. These activities include child survival and development (CSD) actions, particularly universal child immunization (UCI), child care for the under-six age group, education and other priority intervention areas. High-level advocacy, accompanied by social mobilization, has forged a national movement for the cause of children, placing children's issues forcefully at centre stage and strengthening the "children first" ethic.

6. Other important sectors were mobilized in addition to the public sector. The support of scientific groups, especially paediatric associations for the CSD strategy, has been particularly important. Paediatricians met in October 1988 and November 1989 to analyse the situation of children under the age of five and the problems of infant and maternal mortality. The Cocoyoc Declaration constitutes the most significant statement from the region's scientific community on health goals for the 1990s. During the past year, UNICEF strengthened its alliances with the Catholic Church and parliamentary bodies. Central labour unions in the five Andean countries have joined the constellation of UNICEF partners in defence of children's health and well-being.

7. UNICEF offices have continued to enhance the quality of programming in order to optimize internal efficiency through better situation analyses, the pursuit of high-impact approaches, improved monitoring and evaluation and staff development and training.

8. The Convention on the Rights of the Child has been the subject of numerous seminars and conferences. Heads of State, parliamentarians, politicians, judicial authorities, labour unions, non-governmental organizations (NGOs), academics and the public have emphasized the importance of the Convention. Awareness has been raised with regard to persistent human rights violations against children, and the public recognizes that children's rights are often the first to be violated. Paradoxically, children have become the catalyst for important social changes during a decade when the region has suffered most. The child has been both a leading motivator and a beneficiary of programmes to eradicate poverty and has become a "bridge to peace". In the 1990s, children will constitute the population group most capable of accelerating the social development which begins with their own well-being and ultimately affects the well-being of society as a whole.

I. OVERVIEW OF THE REGION

A. The region in the 1980s: a complex legacy

9. The region's 1989 gross domestic product (GDP) was almost 10 per cent below that of 1980. The economic legacy of the 1980s could not be worse. There has been a reduction in GDP per capita, a decline in wages, a rise in unemployment and an average annual inflation rate exceeding 100 per cent. Despite the transfer abroad of over \$200 billion between 1982 and 1989 to service the debt, the region's external indebtedness amounted to \$426 billion in 1989. A debt burden of \$60,000 weighs on each child born in the region today, and the countries continue to struggle with high indebtedness, large transfer of resources and depressed growth and investment.

10. The economic decline of the 1980s affected all countries in the region. In Haiti, the region's poorest nation, cuts in bilateral aid, political uncertainty and declining investment led to a serious decline in GDP. In Mexico, the largest middle-income country in the region, net capital transfers equalled over 4 per cent of GDP. The crisis has also affected oil-exporting countries such as Trinidad and Tobago and Venezuela, which have reported reductions in per capita GDP of 14 and

38 per cent respectively, coupled with a decline in real wages and employment. In Argentina, the crisis reduced investment and economic activity, while increasing inflation and unemployment. In 1988, Brazil witnessed a sharp decline in economic growth, a rate of inflation of 1,900 per cent and an extraordinary transfer of resources to service the external debt. Only 6 of the 24 countries on which the Economic Commission for Latin America and the Caribbean (ECLAC) provides information reported positive per capita GDP growth between 1981 and 1988. The greatest cumulative growth during the period was registered by Chile and Colombia. All countries experienced reduced growth in the formal sector of their economies and an expansion of the informal sectors.

11. In some countries, the economic crisis was complicated by war and violence. Armed conflict in El Salvador and Nicaragua claimed the lives of over 100,000 people, mostly civilians; and women and children accounted for a large proportion of the dead. Guerrilla warfare in Colombia and Peru added thousands to the death toll. Under these conditions, the number of households headed by women and the population of children in especially difficult circumstances expanded dramatically.

12. In some countries, a lucrative rise in drug production displaced the production of basic food crops. As a result, the economies of those countries have become much more vulnerable. But the most serious aspect of the drug trade has been its disruptive escalation of violence and drug use among young people.

13. Another serious problem is the enormous deforestation and environmental deterioration which occurred during the 1980s. In countries such as Haiti and parts of Central America, the amount of arable land has declined by more than 50 per cent. Air pollution in Mexico City and Santiago has reached disturbing levels. In recent years, several countries were hit by floods and droughts which caused extensive damage to agriculture and social services. Countries in the Caribbean and Central America were struck by hurricanes. Chile, El Salvador and Mexico suffered severe earthquakes, and a 1985 volcanic eruption in Armero, Colombia, claimed 20,000 lives. These emergencies brought extensive human and material losses, and their socio-economic effects are still being felt.

14. All of these emergency situations appeared in a context of economic adjustment and recession. The social costs, in terms of contraction in availability of social services, reduced living standards, inflation and unemployment, have been high. This, coupled with the region's status as a net exporter of capital during the 1980s, generated unprecedented poverty. In 1980, approximately 130 million people lived in poverty. In 1990, the figure rose to 204 million. Some 74 million of these people will endure critical poverty. The region has approximately 103 million poor people under the age of 18; in other words, most of the poor are children and most of the children are poor.

15. The process of regional impoverishment is reflected in greater unemployment (7.1 per cent in 1980, as compared to 9.9 per cent in 1988) and the emergence of a growing informal sector where many earn wages below the subsistence level. This poverty is reflected in rising child malnutrition, even in upper middle-income countries. The diet of today's child suffers in terms of both quantity and quality, with the average daily calorie intake per capita below the minimum

requirement in at least nine countries of the region. In countries such as Argentina, Brazil, Haiti, Panama, Peru and Venezuela, dissatisfaction has bred street demonstrations which have threatened political stability. The economic crisis is eroding the strength and credibility of democratic Governments in the region.

16. An analysis of the 1980s would be incomplete without considering the effects of the outbreak of acquired immunodeficiency syndrome (AIDS) in the region. The threat of this disease is felt most directly in the Caribbean, which registers some of the highest per-capita AIDS rates in the world, and in Brazil, which is second world-wide in terms of the number of AIDS cases. It appears that the lethal effects of AIDS will be felt well into the twenty-first century.

B. Positive signs for the future of children and women in the region

17. The region experienced a generalized process of democratization during the decade. In 1989, 10 countries held democratic presidential elections, and a challenge for the 1990s will be to safeguard this democracy in an environment of persistent economic difficulty and rising social demands. Attempts at State reform, intended to decentralize Governments and make them more efficient, are also under way. As a result, new ground for popular participation has been gained. However, there is the hope in the region that trends towards privatization will not preclude public responsibility for health, education and basic social services. In general, the region aspires to State reform with a human face.

18. During the 1980s, social policy sought to overcome its former secondary status. For example, Ecuador has formed a "social front" to co-ordinate and monitor all social sector programmes. In Venezuela, the President presides over a national anti-poverty commission. In Mexico, a stability programme opened the way for national social development convergence between labour, business and Government.

19. The 1980s witnessed increased awareness, political commitment and concrete actions by Governments and society in favour of children's problems. Support from many heads of State for the Convention on the Rights of the Child demonstrates the growing realization of the increased importance of children in the development process. In many areas significant to the well-being of children, the region has seized the crisis as an opportunity to advance CSD and other social interventions. The crisis has generated innovative social initiatives and a growing realization of the importance of children's well-being for a peaceful and prosperous society.

20. The new importance of the social sector has led to defensive measures designed to protect and develop human resources and economic growth. UNICEF actively assisted by launching two strategic initiatives: mobilization of social forces for the cause of children, and adjustment with a human face. This mobilization has succeeded thanks to a new ethic that makes "children first" a major factor in social development. For example, the Brazilian Constitution now contains specific articles on children's rights. A "children first" strategy is being implemented in Argentina to place children on the country's political, economic and social agenda. The concept of children and health as "bridges of peace" has taken root in

Central America. Despite the situation in Haiti, the public is supporting an important movement on behalf of children. The recently elected Government of Bolivia has launched a national child survival plan as an expression of a State policy which gives prime consideration to mother and child. The President of Mexico endorsed the Cocoyoc Declaration, which set regional goals for the reduction of infant and maternal mortality, and the President of Colombia is endeavouring to implement a plan to eradicate poverty. Various presidential forums have also issued declarations supporting the fight against poverty.

C. Adjustment with a human face

21. Adjustment with a human face has attracted the attention of Governments, United Nations agencies and multilateral financial institutions. Numerous studies have documented the negative impact of external debt and traditional adjustment programmes on society's most vulnerable groups. Measures applied in many countries during the second half of the decade were accompanied by mechanisms to alleviate the economic burden of adjustment on the poor. In Bolivia, the social emergency fund has become a social investment fund. Ecuador is employing adjustment measures to repay social debt through programmes designed to meet basic needs. It is also implementing a debt relief scheme for the financing of social programmes. UNICEF advocacy for a human approach to adjustment has led Brazil, Guyana, Jamaica, Mexico and Venezuela to take steps to mitigate the social cost of adjustment. Broad acceptance of this initiative combined with the need to alleviate the burden of external debt prompted the Inter-American Development Bank (IDB) and UNICEF to launch a joint social investment trust fund aimed at easing debt constraint and strengthening human resource investment.

D. Innovative social intervention methodologies

22. The aforementioned strategic initiatives, combined with CSD actions and other positive experiences, helped achieve a 2.6 per cent average annual reduction in the under-five mortality rate (U5MR). The past decade was not only positive in terms of immunization and other CSD actions, it also witnessed a surge of innovative alternatives for child development. Various countries have developed family-based day care models which integrate physical and psycho-social elements. These are combined with efforts to educate parents about CSD. Studies have revealed that traditional economic structures and adjustment measures oblige female workers to bear most of their inequity and impact. These analyses helped to develop innovative activities for increased women's participation in development. Given constrained financial resources, the innovative and low-cost methodologies proposed by UNICEF have gained greater acceptance among Governments. This has meant greater visibility and expectations for UNICEF co-operation.

23. During the 1980s, social mobilization was accepted as a vital tool for achieving and sustaining important goals such as immunization. It also served to accelerate CSD actions and create a social movement for children. Knowledge and attitudes towards children's problems changed, and the "children first" ethic gained momentum.

E. Strategies for children in the 1990s

24. The design of a regional strategy for children in the 1990s was facilitated by the need to develop a strategy which focused on the human dimension with concrete, feasible and quantifiable goals. Such a strategy gives consideration to the current situation of children in the region and to relevant contributions from international and regional forums, including the Cocoyoc Declaration. A more detailed analysis of regional goals and strategies is contained in section VI below.

F. The response of UNICEF

25. Given the challenges of the 1980s, UNICEF responded with imagination to the needs of millions of poor children. In 1982, a strategy was defined for its work in the region which focused on accelerating the survival, development and well-being of children and on deprived geographical areas in which infant mortality was high. Underlying this strategy were advocacy, the development of innovative and cost-effective methodologies; technical advice; empowerment of parents to address children's problems; strengthening of national institutional capacity for efficient management of social programmes; mobilization of internal resources for children's projects; selectivity to avoid undue dispersal of resources; promotion of adjustment that included measures to protect the vulnerable groups; and exchange of successful experiences and methodologies. A regional medium-term plan developed coherent, cost-effective programmes and deployed UNICEF financial and human resources so as to accelerate implementation of priority lines of action and respond to evolving circumstances. The medium-term plan was used by the offices as a point of reference in the negotiation and development of UNICEF country programmes of co-operation.

II. OVERVIEW OF PROGRAMME ACTIVITIES IN 1989

A. Child survival and development

26. The CSD strategy has driven UNICEF co-operation in tackling the causes of morbidity/mortality which have killed approximately 5 million children in the region in the past decade. Initial efforts aimed at promoting breast-feeding, oral rehydration therapy (ORT), use of oral rehydration salts (ORS) and other primary health care (PHC) interventions, along with the successful 1984 Colombia vaccination campaign, laid the basis for national CSD plans in Bolivia, Brazil, the countries of Central America, Chile, Colombia, the Dominican Republic, Ecuador, Mexico, Peru and Uruguay. Advocacy for CSD and effective programmes in this area have heightened awareness of children and women's health among government officials, local community leaders and the general public. Commenting on the child pastorate programme in Brazil, the Archbishop of Sao Paulo, Cardinal Arns Neuman, said: "UNICEF started a small fire that has begun to spread; it cannot be stopped."

27. In addition to strengthening the PHC strategy, integrated CSD programmes feature alliances with sectors and organizations not traditionally involved in health care, such as the Catholic Church, education, labour unions, scouts, NGOs and the mass media. Scaling-up operations at the national level, with efforts concentrated in the more deprived areas, is another common feature.

28. One of the lessons of the decade is the importance of establishing goals and timeframes for their accomplishment. The goals of UCI and the eradication of the wild polio virus by 1990 have mobilized political will and technical and financial resources. The setting of these goals and the successes achieved to date led to more ambitious goals for the 1990s. The Cocoyoc Declaration, which endorsed the Talloires Declaration, calls on Governments to comply with reduction goals for infant mortality rates (IMR), U5MR and maternal mortality rates as well as other health-related goals for the next decade.

29. Experiences during the 1980s underscored the limitations of many health systems in reaching the neediest population groups. Frequently, resources are concentrated at the central level. Strong advocacy of the CSD strategy and the successful implementation of programmes have led efforts to strengthen PHC. This pragmatic approach gained UNICEF credibility with the public health sector, NGOs, religious leaders and the community at large.

Immunization

30. The 1980s witnessed a new style of immunization throughout the region. Without exception, the efforts of all countries to increase coverage reached nation-wide scope. In 1988, coverage for children under age one reached 82 per cent for polio, 59 per cent for combined diphtheria/pertussis/tetanus vaccine (DPT), 63 per cent for measles and 70 per cent for anti-tuberculosis vaccine (BCG). By October 1989, the incidence of polio had declined to 105 confirmed cases, concentrated in less than 2 per cent of the municipalities of the countries. Although difficult to measure, the incidence of other immuno-preventable diseases, with the exception of neonatal tetanus, generally declined in recent years. All countries adopted vaccination strategies which reinforced surveillance activities and routine vaccination at all government and non-government health facilities; created national vaccination days featuring application of all antigens, including tetanus toxoid for women of child-bearing age; and the execution of "mop-up" operations with house-to-house vaccination in polio-infected communities.

31. The status of UCI in the region as of the end of 1988 is as follows: (a) countries that reached 80 per cent coverage and those likely to reach UCI in 1990: Belize, Chile, Colombia, Costa Rica, Cuba, Honduras, Panama, Uruguay and most of the Eastern Caribbean; (b) countries with coverage between 50 to 79 per cent that have potential for UCI but still need strong support: Argentina, Brazil, the Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Mexico, Nicaragua, Paraguay, Peru, Suriname and Venezuela; and (c) countries with approximately 50 per cent coverage that require an extraordinary effort to reach UCI: Bolivia and Haiti. Coverage data for 1989 are not yet available. An unprecedented level of political support for UCI and for polio eradication by 1990,

combined with innovative social mobilization efforts and an outstanding level of technical and financial co-operation with other agencies, has led to the expansion of coverage.

32. For countries that have reached UCI, a major challenge in the 1990s will be maintenance and expansion of coverage. Sustainability requires educated and motivated parents, active community participation and mobilization and the expansion of health services outreach. It also requires political will and the allocation of national funds. Establishment of the UCI and polio eradication goals has helped to strengthen the entire expanded programme on immunization (EPI) and PHC infrastructure, particularly with respect to the decentralization process.

Control of diarrhoeal diseases and acute respiratory infections

33. Diarrhoeal diseases and acute respiratory infections (ARI) are among the main causes of infant and child death, accounting in several countries for half the child mortality rate. In others, diarrhoeal diseases have moved from first to second and/or third place. Twenty-four countries have developed national control of diarrhoeal diseases (CDD) programmes. Seventy per cent of ORS used in the region are produced in 15 countries. Several countries have prepared technical norms for ARI control, and programme implementation is under way. However, CDD/ORT and ARI control programmes are generally lagging, especially when compared with EPI. Parental awareness of ORT has increased, but ORS use remains low. Production and distribution bottle-necks must be solved in some countries. Effective marketing of ORS through commercial channels is incipient in a few countries. Despite these problems, important CDD/ORT experiences have been carried out in Bolivia, Brazil, Colombia, Mexico, Peru and the countries of Central America through the child pastorate programme, which covers an estimated 3,000 parishes and 5 million families. A regional inter-agency committee, composed of the Pan American Health Organization/World Health Organization (PAHO/WHO), UNICEF and the United States Agency for International Development (USAID), was established and set guidelines for the preparation of five-year regional and national CDD plans of action. These plans will facilitate successful implementation of national programmes.

Growth monitoring and nutrition

34. The region achieved important gains in immunization and some advances in CDD/ORT, but breast-feeding promotion and growth monitoring continue to lag. The response of UNICEF to the deterioration in the nutritional status of children and women has been limited. Micronutrient deficiencies have been addressed with relative success, particularly through support for salt iodization and iodized oil capsules or injections, vitamin A distribution and iron/folate supplementation. With UNICEF support, many countries are experimenting with new child and maternal health record cards, thus facilitating accurate record keeping. However, despite recognition of the special importance of growth monitoring, its application has been limited and is often confined to health centres.

Perinatal mortality

35. Progress has been made with respect to reducing the incidence of perinatal problems, a major cause of infant death in most countries. At present, low-cost interventions are limited to tetanus toxoid vaccination, training of traditional birth attendants (TBAs), prenatal care, identification of high-risk pregnancies and ambulatory care of low-birth-weight and premature babies using the "mother kangaroo" technique developed in Colombia. UNICEF has supported the consolidation and expansion of this programme in several countries through the training of peri-neonatologists and nurses. The methodology is also being implemented in Bolivia, Ecuador, El Salvador, Guatemala, Mexico and Peru.

Acquired immunodeficiency syndrome

36. At the end of the 1980s, there was growing concern about the expanding acquired immunodeficiency syndrome (AIDS) epidemic. The shift from homosexual to heterosexual transmission poses serious danger, particularly to the paediatric population. Despite ample information on how the AIDS virus is transmitted, there is still a great deal of misunderstanding and fear. At present, UNICEF is actively involved with educational support activities in the English-speaking Caribbean, the Dominican Republic and Haiti.

B. Water and sanitation

37. At the end of the decade, 30 per cent of the population remains without safe drinking water. The deficit for sanitation services is even higher, generally as a result of behavioural patterns that are difficult to change. Over the years, UNICEF has co-operated with several Governments to provide safe water and sanitation facilities for the poor urban and rural population. It has acquired experience and a good reputation in the development of low-cost water systems.

38. In Guatemala, a low-cost, gravity-fed system has provided drinking water to 500,000 rural poor. In Honduras, 35,000 urban poor are supplied with clean water through a self-financed plan. This has helped to mobilize other partners in pursuit of efforts to expand the water supply. The link being forged with the recently opened United Nations Development Programme (UNDP) Subregional Water Decade Office in Guatemala will greatly facilitate the poor population's access to safe water. The Haiti water project, representing a successful joint venture with NGOs, continues to develop despite administrative constraints. One donor considers the Leogane project, which links water with other basic service interventions, to be the most successful scheme in Haiti. However, the same success cannot be reported for sanitation activities, which continue to lag. Mexico is implementing a low-cost water supply system for 106 dispersed communities in the states of Guerrero and Oaxaca. Following a fact-finding tour of water projects in Mexico by Cuban officials, Cuban project technology was modified through the use of polyvinyl chloride (PVC) pipe instead of galvanized iron, thus making Cuba's projects more cost-effective and accelerating their implementation. In Bolivia, UNICEF teamed up with NGOs to provide drinking water through the Programme for the Andean Region (Programa de la Región Andina) (PROANDES) and the social investment fund. The water project is used as an entry point for other health-related activities and

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social interventions. All projects feature community participation, social mobilization, health education and training of counterparts and community personnel in maintenance operations. Links between water/sanitation activities and CSD actions, particularly CDD, are being pursued in all projects.

C. Early childhood development

39. Initiatives in early child development in the 1980s have taken place mostly through low-cost family-based approaches. UNICEF has promoted the total development of the child through the definition of a conceptual framework for integrated multisectoral development; analysis and systematization of early child care programmes; a study conducted by UNICEF and the International Development Research Centre on child-rearing practices in Southern Cone countries; and joint UNICEF/PAHO co-operation in the design of instruments to measure child development and the inclusion of this topic in health personnel training.

40. National commitment to early child development varies widely. In some countries, programmes to meet total child development needs do not receive the priority they deserve. However, Colombia's family-based day-care programme, which covered 600,000 children by the end of 1989, or 36 per cent of the target for 1991, is an important experience that has been taken to national scale. That programme aimed to provide integral care to 75 per cent of all poor children under seven. A significant non-centre-based strategy for child development has been promoted in Haiti through the "family knowledge is children's hope" project which utilized mass media and parental education in all types of interventions. New strategies have also been developed in the English-speaking Caribbean where the emphasis is on information and social mobilization, including public education, teacher training and direct parent/community education. Appreciation of the need for an integral view of child development is growing, often as part of child survival interventions. In northeastern Brazil, efforts have been made to integrate early childhood stimulation, child disability prevention and early detection interventions into PHC programmes at the state level. After its first year, Uruguay's programme for integral attention to the young child, financed through the Special Adjustment Facility for Latin America and the Caribbean (SAFLAC), has redirected social spending and mobilized more resources, while permitting the development of innovative social interventions and laying foundations for a new approach to social policy.

D. Basic education

41. In recent years, the region significantly expanded educational coverage and access. However, student achievement, particularly in the lower socio-economic strata, has not increased at the same rate. Efficiency in educational systems has declined and studies by the World Bank and the United Nations Educational, Scientific and Cultural Organization (UNESCO) reveal that in the 1980s school failure and repetition rates increased, especially in the first two years of primary education. For example, some 10 million students in the region repeat academic years, at an average annual cost of about \$100 per student. Some 54 per cent of students who begin primary school do not finish. Recent evaluations

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suggest a need for strategies designed to reduce the impact of insufficient emphasis in the first grade on the development of basic skills for reading, writing and numeracy; the shock of transition from the home and day-care environment to the first grade of primary school; the wide variety of ages, experiences, interests and learning skills commonly found in the first grade, particularly in rural areas; restrictions upon school attendance such as inadequate nutrition and/or transportation; lack of educational materials; and inadequate training and incentives for teachers to work in remote areas. To improve the quality and efficiency of education, some policies will have to be changed.

42. At the country level, several experiences supported by UNICEF are being developed. In Colombia, the new school programme has gone to scale and the theme of child survival is included at all levels of education. This methodology is being transferred to other countries. For example, the Government of Bolivia has established multi-grade primary education covering 60,000 children in 1,700 schools. Intercultural bilingual education is being promoted to improve the quality of primary education in rural areas. In the English-speaking Caribbean, schools are implementing child health education into primary schools, and the results of student testing are encouraging. As a prelude to the 1990 World Conference on Education for All, regional consultations were held in Jamaica and Quito. A Latin America and Caribbean perspective emerged from these meetings, with emphasis on early childhood education, universalization of primary education and literacy.

43. Strategies for flexible learning systems, church alliances and the use of communications media to expand programmes are being applied in several countries. In El Salvador, a radio literacy project implemented in conjunction with the Catholic Church has gone to scale and the expansion of "active schools", designed after the Colombian new school programme, is offering an alternative to traditional methodologies. UNICEF is supporting the Catholic Church literacy programme in Haiti. In northeastern Brazil, UNICEF supports community schools, weekend schools for youth and adult literacy and other non-formal initiatives. Women have benefited greatly from these interventions.

E. Women in development

44. During the 1980s, the UNICEF response to poor women's needs implied changes in strategy and methodology. A development-oriented approach was adopted early in the decade in order to encourage the insertion of women-related concerns into national social policy or development plans; the clear articulation of women's needs (not just as mothers); the identification of women as direct beneficiaries, dispensers of services and agents of change; and institutional commitments guaranteeing expansion of project coverage. The thrust of the strategy in these areas has been advocacy, basic services, income-generating activities, organization of women and institutionalization. These components have been implemented in accordance with country circumstances and institutional capacities. Country programmes being presented to the 1990 Executive Board reflect this approach. By the end of the 1980s, the number of country programmes of co-operation featuring actions for women, either as separate activities or a part of all projects, had increased from 7 to 20.

45. Advocacy and technical assistance to Governments have focused on effective implementation of the development approaches which have helped to increase coverage. Brazil extended its income-generation project to six northeastern states. In the Caribbean, UNICEF is supporting a programme for the prevention of teen-age pregnancy in 12 countries. In Colombia, the project to organize peasant women was expanded to cover 18,000 beneficiaries. In Mexico, support is being provided to a project designed to alleviate the domestic work-load and improve the living conditions of indigenous women. Through mobilization of women for child survival, Peru has strengthened grass-roots women's organizations affecting 600,000 women in rural and urban areas. Two subregional projects in Central America, "Women in development" and "Women's education for child survival", have led to the organization of women at the grass-roots level and their empowerment in child survival techniques. In the Dominican Republic, UNICEF has supported the definition and implementation of a policy to foster women's participation in development; and advocacy is pursued to encourage legal reforms that benefit women.

46. At the regional level, emphasis was placed on advocacy, staff training, technical assistance and the exchange of experiences and expertise. Advocacy has been possible through studies on specific women's issues and the evaluation of ongoing projects, as have been carried out in Bolivia, the Dominican Republic, Ecuador, Uruguay and Venezuela; and regional encounters for NGOs and government agencies. As demand has grown for the UNICEF publication, Invisible Adjustment: Impact of the Crisis on Poor Women, it has been reprinted with the addition of two case studies. Several regional workshops and seminars on women-related topics have been held to enhance the capacity of government and UNICEF staff and to exchange experiences. Special importance has been attached to the documentation and dissemination of successful initiatives.

47. Many accomplishments were the result of a concerted and systematic effort pursued within the framework of the regional programme for women in development, which ensures compliance with UNICEF policies for women. An evaluation of that programme was conducted with the participation of the United Nations Development Fund for Women (UNIFEM), PAHO and an outside consultant. It recommended continuation of the regional programme, which will be presented to the 1990 Executive Board.

F. Children in especially difficult circumstances

48. UNICEF work in this area emerged in the 1980s as a response to the problem of abandoned children and street children. Regional congresses held in 1984 and 1985 generated favourable reactions to government, church and NGO approaches to the problem. Emphasis has been placed on community-based and low-cost models that can influence national policy, create an impact and be replicated. Projects for the children in especially difficult circumstances (CEDC) provide comprehensive attention to health, education, nutrition, occupational training, reintegration into the family and community and psycho-social adjustment.

49. A significant achievement has been the design of methodologies for situation analysis, institutional opening and evaluation. The situation analysis methodology is being applied in 15 countries, providing reliable information on the real

magnitude of the CEDC problem and helping to formulate national policy and programmes. Institutional opening was designed to improve the manner in which problems of institutionalized children are addressed and to link institutions with communities. The response has been positive, with 15 countries modifying traditional policies. Colombia, Ecuador and Mexico are applying the project evaluation guidelines. In 1987, the regional office began publishing documents that facilitated an exchange of knowledge and experience. Eight booklets have been produced in English, French, Portuguese and Spanish. Some of them document successful and innovative projects, while others present methodologies to address the problems of these children. Several publications have been reprinted because of increased demand in and outside the region.

50. Various meetings, seminars and project visits were conducted to exchange experiences and enhance the capacity of UNICEF staff and their government counterparts. In 1989, the Brasília Office sponsored a meeting of government, church and NGO representatives to analyse the results of CEDC projects in the 1980s. It was concluded that those projects which had gone to scale were successfully preventing violence against children, increasing awareness and creating a national pro-child movement. In Mexico, the CEDC programme has been taken to national scale.

51. Action for children who are victims of armed conflict has moved forward, but coverage still is limited. Numerous factors in Central America, including the failure of some Governments to acknowledge the refugee situation, have made it necessary for UNICEF to address this issue through urban basic services programmes rather than directly. UNICEF activities have resettled displaced population groups, and a major component of the Central America CEDC subregional programme, to be presented to the Executive Board in 1990, focuses on children in armed conflict.

52. The decade has witnessed major accomplishments as a result of advocacy and financial and technical support, and demand for this type of assistance is growing. Projects for CEDC are being implemented in most countries. National movements urging the community to protect and help these children have been created in several countries. There has been a clear change of attitude at various levels of society regarding these children, and a regional movement on their behalf is now under way. UNICEF continues to work with Childhope in supporting government efforts in this area.

G. Urban basic services

53. Accelerated urbanization continues to challenge Governments and to exert pressure upon limited social services. UNICEF is co-operating with the Governments of several countries in their efforts to address the problems of the urban poor by supporting basic service programmes which emphasize active involvement of the community in development. These programmes are at different stages of development, but evaluations indicate that some have achieved their objectives and have been consolidated and expanded into large-scale initiatives. Others have suffered delays resulting from managerial difficulties, lack of resources and political commitment or sensitivity to the problems of the urban poor.

54. Successful experiences in pioneer countries such as Brazil, Colombia, Ecuador and Peru have contributed to the development of programmes in Argentina, Belize, Central America, Haiti, Jamaica, Mexico and Panama. The Central America subregional programme continues to develop well. This is exemplified in El Mesquital, Guatemala, where community mobilization has resulted in expansion of the project to 28 poor urban communities. In Nicaragua, poor urban groups, especially women, have been mobilized to improve the social conditions of their communities as well as environmental protection. The Mexico programme successfully developed a methodology for PHC delivery and a local health information system, which have been adopted by national institutions. Emphasis is now placed on nutrition and income-generating activities for women through the implementation of a community kitchen project in marginal areas of Mexico City. Fifty kitchens now benefit 3,000 families. In Brazil, the model successfully developed in marginal areas of Rio de Janeiro has been transferred to five States in the north-east. In Colombia, the Bucaramanga programme has been consolidated and institutionalized as a successful model. In Bogotá, the programme has encountered delays in implementation. However, the components of EPI and family-based, day-care projects are progressing.

55. After positive initial results with the development of a successful model for PHC intervention in urban areas and implementation of a comprehensive child care model, the Guasmo programme in Guayaquil, Ecuador, has lost momentum because of administrative and financial difficulties. The Argentina programme was plagued by numerous administrative and bureaucratic bottle-necks. To accelerate implementation, a new administrative structure was created for a direct working relationship with municipalities. The CSD programme in Peru shows that the mobilization strategy can heighten interest in the problems of poor urban children, even in times of political and socio-economic crisis.

56. Experience reveals the following elements as key to the success of urban basic services programmes: political commitment; community involvement; strong intersectoral co-ordination, accompanied by decentralization at the execution level; guaranteed counterpart resources; and simple monitoring and evaluation instruments to be used by the community for feedback on programme development. Another lesson is that simultaneous implementation of the total package of interventions is difficult. Gradual implementation is more realistic.

H. Special Adjustment Facility for Latin America and the Caribbean

57. UNICEF credibility and capacity for mobilization around the cause of poor children increased considerably during the 1980s. The concept of adjustment with a human face was instrumental in giving due weight to social realities in the adjustment programmes of several countries. However, this could not have been achieved if UNICEF had not provided an appropriate response to the challenges posed by the economic crisis and regional impoverishment.

58. SAFLAC enables UNICEF to help countries to define strategies and programmes to mitigate socio-economic deterioration, particularly in countries where social indicators have reached high average indexes but encompass sharp disparities. SAFLAC supports proposals that lead to a significant expansion of UNICEF work at

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the country level by mobilizing internal resources for projects benefiting low-income children and women, as in Argentina, Brazil, Cuba, Mexico and Uruguay. In such countries as Ecuador, Guyana, Jamaica, Paraguay, Peru and Venezuela, SAFLAC deals with social indicators, the design and implementation of social programmes and the strengthening of the Government's capacity to develop and implement social policies. In Chile, the thrust is to place children's issues on political agendas.

59. By avoiding greater social deterioration and making social investment feasible during critical moments of the crisis, SAFLAC achieves a high rate of social return. To date, it has proved to be a necessary adjustment facility. A report on SAFLAC activities will be presented to the 1990 Executive Board (see E/ICEF/1990/L.2).

I. Social communication and mobilization

60. Over the last five years, social communication has become an integral part of UNICEF programmes of co-operation. Social mobilization is a principal thrust of many programmes, especially in the high-income countries. Since 1984, when Colombia carried out the first immunization campaign with social mobilization as a vital component, all countries have been quick to follow suit. Alliances committed to child survival and well-being have been forged between a wide variety of government institutions and NGOs. The rapid development and acceptance of social mobilization as an essential element for programme success and sustainability has led to a strengthening of UNICEF internal capacity, mainly through staff training at the regional and country levels. Offices have highlighted the social communication and mobilization aspect in situation analyses and country programmes. It has become a vital part of the programming process.

61. Social mobilization strategy is oriented towards creating an informed demand for services in poor communities; educating parents, families and communities, particularly in the area of CSD; and strengthening the supply of services by committing organizational resources. At present, social mobilization is a key component of EPI strategy and is helping to sustain UCI efforts. UNICEF co-operation is increasingly oriented toward strengthening institutional capacity. In Colombia, UNICEF is supporting a social communication project at the Ministry of Communication to design communication strategies for social development programmes. The Peru CSD programme focusing on mobilization of grass-roots women's organizations is enhancing their capacity. In Brazil, social mobilization, the pillar of the UNICEF country programme, has led to important alliances with NGOs and media such as Globo Televisão. In the Caribbean, social mobilization is the centrepiece of the UNICEF co-operation strategy. This is particularly reflected in the better parenting programme for teen-age boys and girls. In Central America, a subregional social mobilization programme has been developed to strengthen ongoing country programmes and to educate parents on CSD.

62. Important mobilization initiatives also have taken place at regional and country levels, particularly with the Catholic Church, parliamentary groups, regional social communication organizations and paediatric and public health associations. These initiatives have increased awareness of children's needs and secured commitments to CSD actions and other social interventions. In

co-ordination with the UNESCO Regional Communication Office, alliances have been forged with regional social communication agencies to further strengthen social communication in CSD strategy. These agencies are promoting the Convention and disseminating Facts for Life messages.

J. Programming, monitoring and evaluation

63. Improving programme quality and performance was a serious challenge throughout the 1980s. All offices intensified efforts in this area. Workshops on situation analysis, programming and evaluation were conducted at the regional level to enhance staff skills. This led to a qualitative improvement in programming and evaluation activities. Systematic preview and review of country programmes conducted annually by the regional office, in conjunction with headquarters, examined programme strategy and the extent to which proposed programmes were consistent with corporate and regional medium-term plan priorities. The regional office provides technical support to the offices in several areas, including planning, programming and evaluation. At the country level, many initiatives were undertaken to strengthen government counterpart capacity in the area of programming, monitoring and evaluation.

64. Emphasis on evaluation has increased over the years and numerous activities were carried out at the regional and country levels, including some 200 evaluations conducted between 1985 and 1989. Evaluation led to the phasing out of UNICEF support for certain projects, such as a water project in Bolivia; expansion of some programmes to the national level, such as the CEDC project in Mexico and family-based day care in Colombia; and the redesign of a country programme in Nicaragua and of an urban basic services programme in Haiti. Evaluation has also been very useful in designing strategy and content for upcoming country programmes. In the late 1980s, a series of rapid appraisals of EPI were undertaken in Chile, Colombia, the Dominican Republic, Ecuador and Haiti which have focused attention on the weak points of EPI activities. Examples of evaluations carried out in 1989 include an appraisal of the sentinel site component of the child survival programme in Central America which recommended that it be strengthened through better diffusion of data among government technical personnel and greater local participation; an evaluation of the child development project in Chile which showed that its low-cost, community-based approach was an effective alternative to the traditional model; and an evaluation of the regional programme for women in development which led to its continuation with a reoriented approach and content.

65. Over the years, offices have pursued efforts to help strengthen existing national social information systems. Work is being carried out in several countries to develop systems of social indicators which monitor changes in the situation of children and women and provide feedback for rapid corrective action. Some activities undertaken in this area include support to Jamaica for the establishment of an institution-based system to monitor the status of vulnerable groups; to Guyana to monitor social indicators; and to the institute of statistics in Brazil to consolidate the social indicators system. Venezuela provided a good example of political interest in the issue of social indicators through an international meeting convened by the President to discuss effective development indicators.

III. PROGRAMME MANAGEMENT AND OPERATIONS

66. As noted in the introduction, several offices were either created, upgraded or reorganized to meet the challenges of the 1980s. The wider dimension of country programmes, coupled with an emphasis on improved efficiency, effectiveness and accountability, led offices to strengthen their capacity through staff growth and internal restructuring. In line with organizational, regional and country programme goals and priorities, offices have been restructured. Large offices such as the Brazil office continue to delegate programme management responsibilities to project sites. Consultative committees such as the Joint Consultative Committee, the Appointment and Placement Committee and local training committees were established. These work together with staff associations and management to review administrative and personnel issues and to define training needs, among others.

67. While continuing to enhance professionalism and technical capacity, offices improved their performance through the establishment of appropriate internal monitoring and control mechanisms to ensure adherence to rules and procedures. Strict budgetary and financial control and personnel monitoring are examples of this. In the programme area, precisely targeted plans of action and improved use of computer systems have improved the monitoring of programme implementation.

68. Improving efficiency and effectiveness through staff training remains a high priority. With support from the headquarters training section, workshops have been organized at regional and country levels on all areas of UNICEF work: situation analysis, programming, evaluation, management, salary survey, social mobilization, the Programme Information Data Base system and supply operations. Whenever possible, training packages have been used. To date, 90 to 95 per cent of all staff in the region have had access to training. Besides increasing efficiency and productivity, this boosts morale and self-confidence. There also has been an exchange of staff among offices to assist in programming, personnel, administration and finance.

69. Office computerization is another tool to improve and maintain efficiency and financial management. Almost all offices implemented the Global Field Services System, thus facilitating better financial control and easy access to accurate data on programme implementation. Several offices such as those of Brazil, Colombia and Guatemala have acquired advanced computer skills, enabling them to share expertise and experience with other offices in the region.

70. Through training and technical support from the regional office, salary surveys are conducted periodically, thus ensuring salaries that best meet staff needs. To encourage and motivate staff members, offices have emphasized internal recruitment by facilitating the promotion of General Service staff to the Professional category and by supporting the appointment of national officers to international posts. Emphasis has also been placed on the recruitment of women for professional positions, of which they now occupy 43.3 per cent.

71. Throughout the decade, the regional office continued to work with all offices in an integrated manner, providing ongoing advisory support to policy application,

ensuring programme compliance with corporate and regional priorities, assuring systematization of experiences and assisting in programme strategy development. Senior staff members periodically visit the offices to assist in high-level advocacy, and regional advisers provide technical support. The result is a region cohesive in its attitude and consistent in its approach.

IV. EXTERNAL RELATIONS

A. Partnership and alliances

72. UNICEF co-operation with the Catholic Church in the area of CSD has been strengthened over the years and was evaluated at a UNICEF-supported seminar held at Quito in April, 1989. The evaluation highlighted the Church's commitment to CSD activities, its advocacy and mobilization role to convey CSD messages to isolated communities and its effectiveness in conducting CSD work at the grass-roots level, particularly in areas where State presence is minimal. Notable co-operation included the child pastorate programme in Brazil and the agreement reached with the Church in Peru which helped to accelerate and expand CSD efforts in several departments. UNICEF and the Archbishop of Buenos Aires entered into a CSD co-operation agreement. The health ministries of Guatemala and Bolivia signed CSD agreements with the Catholic Church and UNICEF similar to those previously concluded with Colombia, Ecuador, El Salvador and Peru; and work continues with the Church in Paraguay and Venezuela. Of special significance was the audience granted in January 1989 by His Holiness John Paul II to the Regional Director and a small group of staff members from the region. The Pope expressed support for UNICEF work and issued a new message reinforcing his 1988 Lenten message on CSD. Vigorous efforts are being pursued towards formal co-operation with the Church in the Dominican Republic, Haiti, Mexico and Nicaragua, where joint CSD activities have yet to be developed.

73. Seminars and conferences have been used to strengthen working relations with parliaments in Argentina, Bolivia, countries of the Caribbean and Central America and Venezuela. These meetings have created awareness of children's problems and made children a social priority on national political agendas. Collaboration with the Andean Parliament was strengthened. Parliamentarians are now taking a closer look at the impact of recession and adjustment policies on children and women. The Congress of Ecuador has established a permanent commission to study the situation of children. In Peru, the Congress approved legislation to reduce infant mortality and hosted the launching of the 1989 State of the World's Children report. The Congress of Bolivia held a special session honouring UNICEF and pledged its support to children's programmes; and a commission for minors was created to formulate legislation on their behalf. The Caribbean parliamentary symposium held in October 1989 in Barbados discussed children's rights and ways to provide a better life for children in the subregion. It also expressed support for the Convention and the World Summit for Children. In the Dominican Republic, the Senate approved legislation to protect street children.

74. A major initiative of 1989 was the Congress of Andean Labour Unions on Health and Popular Participation, jointly organized by UNICEF and the Bolivian labour

union at Cochabamba, Bolivia. The gathering, attended by representatives of all national labour federations, discussed the health status of Andean children and the role of labour unions in accelerating CSD activities in their countries. A declaration supporting the CSD strategy was passed, and efforts to define a joint plan of action are under way at the country level. As a result of that commitment, the Peruvian federation of workers pledged support to national vaccination days.

B. Information and media network

75. Sustained advocacy for children was undertaken in all countries during the 1980s. Besides raising awareness among political leaders, influential sectors of society and the public, it secured support for specific CSD actions and other programmes. In Colombia, newly elected mayors responded to an appeal urging them to assume responsibility for vaccination in their municipalities. In Argentina, the "Children first" project increased social and political attention to children's needs at a time of unprecedented economic crisis. In Venezuela, the President pledged his support for the World Summit for Children and for the Convention. At a ceremony attended by members of the diplomatic corps and Goodwill Ambassador Audrey Hepburn, the President of Ecuador officially launched the subregional PROANDES programme to reduce poverty. The 1990 State of the World's Children report was successfully launched in several countries and received wide media coverage. The report was launched in Colombia at the Presidential Palace with the First Lady and government officials attending, and in Peru, at the cathedral of Lima in the presence of all segments of society.

76. Over the years, there have been a number of visits from representatives of National Committees, journalists and film producers from Europe and North America to various projects in the region. Goodwill Ambassadors Liv Ullman, Audrey Hepburn and Harry Belafonte toured projects and discussed the situation of children in several countries.

77. Media relations have been strengthened in many countries, thus providing a more permanent space for advocacy. In Central America, an annual press award has contributed to more permanent relations with journalists. The "regional news flash" has entered its second year, constituting an appropriate means of exchanging information among the offices, while keeping headquarters abreast of matters of interest. A recent evaluation by headquarters of external relations in Brazil, Colombia and El Salvador may shed light on ways to enhance work in this area. The goals for the 1990s include vigorous advocacy efforts and the effective implementation of a previously developed regional information strategy.

C. Draft Convention on the Rights of the Child

78. All offices intensified advocacy efforts with government officials, parliamentarians, NGOs, religious organizations, universities, the communications media and the general public for adoption and ratification of the draft Convention:

(a) Advocacy with heads of State led to open support for the draft Convention in statements made at the 1989 session of the General Assembly of the United Nations. In Central America, children's rights and the draft Convention were discussed at a presidential summit meeting and a meeting of First Ladies. Both events resulted in statements endorsing the draft Convention;

(b) Meetings on the draft Convention were held for parliamentarians in the Andean countries, Argentina, the English-speaking Caribbean and Central America. All affirmed their support for early adoption and ratification. In Bolivia, Brazil, Colombia and Peru, UNICEF held frequent consultations with national congressional bodies to enlist their support. The Peruvian Senate approved a motion committing the Government to adoption and immediate ratification of the draft Convention. Mobilization efforts are under way in Brazil to ensure that legislation is consistent with the new Constitution, which gives particular attention to children's rights;

(c) Advocacy by the Santiago office led to a public declaration of support for the draft Convention from all three presidential candidates. At a recent UNICEF-sponsored forum on children's rights in Venezuela, the President, addressing the closing session, reiterated his Government's support. In Mexico, the National University and UNICEF sponsored a colloquium to discuss children's rights. A major drive launched by the Haiti office has resulted in support from the Government and religious leaders, who included the topic in their sermons. In Colombia, a minors' code was adopted which incorporated the principles of the draft Convention.

79. In view of the keen interest and strong support for the draft Convention, which has now been adopted, there is reason to believe it will be ratified quickly by several countries of the region.

V. OTHER SUPPORTING ACTIONS

A. Fund-raising

80. Mobilization of additional local and external funding to expand UNICEF-supported programmes has received priority attention. A regional fund-raising strategy was defined in 1986 and an implementation mechanism was developed in collaboration with the Programme Funding Office. Fund-raising is being pursued and supplementary funding has acquired substantial importance in the region. During the decade, supplementary funds increased nearly 12-fold, from \$3.4 million in 1980 to approximately \$40 million in 1989.

81. Offices made intensive efforts to boost fund-raising through advocacy. The annual UNICEF/Globo Televisão children's week campaign in Brazil raised more than \$1 million for UNICEF-supported projects in 1989. The Bolivia office successfully secured resources from the special emergency fund to finance expansion of the water project. Fund-raising by the regional office, the Caribbean, Central America and Peru offices and constant dialogue with donor missions and National Committees have yielded very good results. The Canadian International Development Agency has pledged funding for the better parenting programme in the Caribbean and is

financing the Colombia CSD programme; the Swedish International Development Agency is financing the water supply project in Central America and immunization in Peru; PROANDES is being financed by the Spanish National Committee. Other actions to mobilize resources include consultations with representatives of regional financial institutions which resulted in support by IDB to immunization activities in north-east Brazil and the water supply project in Oaxaca, Mexico.

82. The potential of the Greeting Card Operation (GCO) as a source of income is well recognized. Sales in many countries have increased despite the economic recession. Once again, in 1989 the First Lady of Mexico launched the campaign in an official ceremony. Reorganization of the GCO structure allowing offices greater involvement in its activities will permit a better understanding of UNICEF and will improve sales. Indications are that the 1989 campaign should bring good results. Allowing a portion of GCO proceeds to remain in the countries for specific earmarked projects would be a strong incentive to increase sales.

B. Inter-agency co-operation

83. An important dimension of UNICEF work concerns the mobilization of other United Nations agencies around common programme priorities and areas of mutual interest. Experience in this field has been somewhat mixed. Partnership work involving common goals and programmes has been positive, but inter-agency co-operation has been unstructured and unsystematic. Enhanced efforts are required to make it more effective.

84. During the period, regional co-operative agreements were established with PAHO/WHO and the Regional Programme for Employment in Latin America and the Caribbean (Programa Regional de Empleo para América Latina y el Caribe) (PREALC). Others with the Latin American Institute for Economic and Social Planning (Instituto Latinoamericano de Planificación Económica y Social) (ILPES) and UNESCO will be signed soon. Drawing on experience with PAHO/WHO, these agreements help to strengthen collaborative work between the agencies. Thanks to vigorous efforts pursued by all offices, the decade has seen the growth of co-operation with PAHO; close collaboration with UNDP, the World Food Programme (WFP) and UNESCO; and increased country-level co-operation with PREALC, ILPES, UNIFEM, the World Bank, IDB and the United Nations Population Fund (UNFPA). These partnerships have been guided by principles of complementarity and mutual respect. Annual technical co-ordination review meetings with PAHO led to collaboration on EPI, CDD/ORT, ARI, women's health and nutrition. This has helped to maintain a good understanding between the two organizations, though difficulties sometimes arise. Collaboration with UNDP encompasses several areas. The Lima and Guatemala offices worked closely with UNDP on the preparation of a social emergency programme in Peru and on an economic co-operation plan in Central America. Recently, co-ordinated action was initiated with UNDP, UNESCO and the World Bank concerning regional consultations on the World Conference on Education for All. A close working relationship is maintained with WFP on CSD projects in some countries, and UNICEF shares office space with WFP in Recife, Brazil.

85. Collaboration with the World Bank has included a regional seminar on adjustment and the design of social projects and management of preparatory activities for a large health-sector loan to Bolivia. In several countries, UNICEF continues to work closely with UNESCO on pre-schools and primary education, co-sponsoring seminars and the publication of materials. In partnership with UNICEF, ECLAC organized a regional inter-agency consultation to exchange views on socio-economic development perspectives, goals and strategies for the decade.

C. Technical co-operation among developing countries

86. An important feature of UNICEF work is the promotion and support of co-operation between countries through the sharing of successful programme experiences and technical expertise. Having realized that isolation hinders prospects for socio-economic recovery and development, Governments are seeking closer co-operation. This has accelerated the technical co-operation among developing countries (TCDC) activities in several priority fields. Government officials from Africa, Asia, the Middle East and countries of the region observed the successful 1984 and 1985 vaccination campaigns in Colombia. Fact-finding missions to the family-based day care and "New School" programmes in Colombia were arranged for the First Ladies of Ecuador, Mexico and Venezuela and government officials from other countries. Training sessions for specialists and presentations at international health conferences demonstrated for the benefit of countries both within and outside the region the methodology of the low-birth-weight and premature baby programme in Colombia. In Central America, inter-country co-operation was vigorously pursued through an exchange of expertise, subregional seminars and transborder meetings involving government officials. UNICEF arranged study tours for high-level government officials from China, Ethiopia, India and Sri Lanka to observe methodology, design and implementation of UNICEF-supported programmes in Brazil, Colombia and Peru. Experiences with street children in Brazil, Colombia, Ecuador and Mexico were shared with several countries in and outside the region through study visits, publications and meetings. The Brasilia office supports Portuguese-speaking countries in Africa by sharing Brazilian experience and expertise in several priority areas. Brazil also shares with other countries its experience in CSD mobilization involving the Church. Through seminars and study visits, experiences in women's micro-enterprises were shared with countries of the region. The Bolivia office extended technical co-operation to Venezuela in the area of women's concerns, and to Ecuador and Guatemala in the field of iodine deficiency disorders.

VI. LOOKING TO THE FUTURE

87. If the 1980s left a complex legacy, the 1990s promise a tight agenda. The decade begins with efforts to achieve UCI and polio eradication by 1990, and to attain the proposed goals for children in the 1990s. The opening of the decade also marks a special effort towards country-level ratification of the Convention. Observance of the provisions of the Convention means that UNICEF must expand its traditional areas of activity and create new ones. The year 1990 will also witness two momentous gatherings, the World Conference on Education for All and the World

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Summit for Children. The 1990s will be an intense and challenging period in which UNICEF must respond to upcoming opportunities to provide children with a better future.

88. From the perspective of UNICEF in the region, this coincides with a highly sensitive priority, the reversal of the trend towards impoverishment. To achieve this, the region must experience a recovery of economic growth; a halt to inertial social deterioration; maintenance of democracy and a reduction in social inequity; environmental conservation and development; and peace as both an expression and a means of achieving social objectives. The central task will be to help Governments provide for the well-being of poor children. It is hoped that countries will rise to challenges with political will and commitment. In that context, the following emerge as regional priorities for the 1990s.

89. Based on lessons and expertise gained through implementation of CSD actions during the 1980s, UNICEF faces the new decade confident in a renewed commitment to children's health and well-being. The consolidation and expansion of CSD and the treatment of other growing health concerns should be pursued vigorously. High priority will be placed on UCI and the eradication of polio in 1990. In conjunction with PAHO/WHO, UNICEF will support efforts to ensure that UCI achievements are sustained. Proposed goals for measles eradication and the elimination of neonatal tetanus in the 1990s will have an important impact on IMR/U5MR reduction. Emphasis will be placed on reaching CSD goals stipulated in the Cocoyoc Declaration. Priority will be placed on perinatal problems and the reduction of maternal mortality. The control of ORT and ARI will be vigorously promoted.

90. Since various countries will have achieved a high child survival level, intensified efforts will be required to make a dramatic impact on development. UNICEF will emphasize low-cost and non-conventional interventions which support the development of children under the age of six with strong community mobilization and parental empowerment.

91. Child and maternal nutrition will receive priority attention. Prime consideration will be given to the control of vitamin A deficiencies, iodine deficiency disorders and nutritional iron anaemia; strengthening of food and nutrition surveillance; and promotion of food production at the family and community levels. Regular growth monitoring will be promoted and placed in the hands of parents. Efforts to promote breast-feeding and good weaning practices to prevent low birth weight will also be continued, as will treatment of premature babies.

92. Consistent with the objectives of the World Conference on Education for All, basic education will be an important area of action in the years ahead. Special emphasis will be placed on improving the quality and efficiency of educational systems, and priority will be given to the universalization of primary education and female literacy.

93. Women in the region perform multiple functions related to child survival and socio-economic development. UNICEF will support the empowerment of women not only

by addressing their health and educational needs, but also by encouraging access to credit for poor women and by making female heads of households the subject of special attention in country programmes.

94. The number of children in especially difficult circumstances has increased at an alarming rate. Strategies will combine preventive CEDC activities with a broadening of community-based services designed to reintegrate children and families. Institutional opening will continue to be encouraged. Action also will focus on providing children aged 7 to 15 with protection that fosters personal and cultural identity.

95. In the 1980s, UNICEF was able to convince Governments that "Adjustment shall protect the poor". Attempts will be made to go beyond adjustment with a human face towards "development with a human face", thus broadening the effort. Such initiatives should be accompanied by debt relief. UNICEF will advocate similar action in co-ordination with financial institutions such as the IDB/UNICEF social investment for debt relief.

96. Countries of the region must redouble their efforts to update and consolidate social indicators that provide reliable and timely data, especially on the situation of children. Therefore, UNICEF will continue to strengthen national social information systems as mechanisms to promote the goals for children in the 1990s and to galvanize political will.

97. Country programmes will pay particular attention to protection of the environment through education and conservation-related actions which are pertinent to children's well-being.

98. The goals for the 1990s must be achieved within the context of an effective effort to combat poverty. Therefore, two operational principles are particularly important: the reduction of internal socio-economic disparities, coupled with a bid for international solidarity in this endeavour; and mobilization of civil society and internal resources for children's well-being, as a means of pursuing the "children first" ethic. Social mobilization designed to increase the demand and supply of services for children will be strengthened. Renewed efforts will be made to educate and empower parents, families and communities, thereby reaching those who traditionally have been unreachable. Finally, the country approach will continue to guide UNICEF co-operation, which varies in accordance with each country's socio-economic and political circumstances.



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FOR INFORMATION

PROGRAMME DEVELOPMENT IN THE EAST ASIA AND PAKISTAN REGION
AND CHINA

The present document provides an overview of UNICEF programme co-operation in the East Asia and Pakistan region and China during 1989.

The UNICEF regional office has responsibility for UNICEF co-operation in the following countries and territories: Bangladesh, Brunei Darussalam, Democratic People's Republic of Korea, Hong Kong, Indonesia, Kampuchea, Lao People's Democratic Republic, Malaysia, Myanmar,* Pakistan, Papua New Guinea, Philippines, Republic of Korea, Singapore, Thailand, Viet Nam and the countries in the Pacific region (Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu, Vanuatu). The UNICEF office at Beijing is responsible for programme co-operation in China.

* The Union of Burma changed its name officially in May 1989 to the Union of Myanmar.

CONTENTS

	Paragraphs	Page
I. EAST ASIA AND PAKISTAN REGION	1 - 95	4
A. Regional overview	1 - 11	4
1. Major political developments	2 - 4	4
2. Economic trends	5 - 9	4
3. Poverty	10 - 11	6
B. Programme progress and trends	12 - 69	6
1. Child survival and development priorities	12 - 27	6
2. Nutrition	28 - 38	10
3. Progress report on acquired immunodeficiency syndrome (AIDS).....	39 - 41	11
4. Women's activities	42 - 47	12
5. Urban services	48 - 49	13
6. Children in especially difficult circumstances	50 - 52	14
7. Education and early childhood development	53 - 62	14
8. Goals and strategies for the 1990s	63 - 67	16
9. Supplementary funds and the use of global funds ...	68 - 69	17
C. Regional services	70 - 95	17
1. Planning, evaluation and monitoring services	70 - 73	17
2. Regional nutrition services	74 - 76	18
3. Advisory services for urban services and children in especially difficult circumstances	77	18
4. Supply operations	78 - 79	19
5. Administration, personnel and finance	80 - 81	19
6. External relations	82 - 87	19

/...

CONTENTS (continued)

	<u>Paragraphs</u>	<u>Page</u>
7. Regional personnel	88	20
8. Programme support communications	89 - 90	20
9. Inter-agency co-operation	91 - 95	21
II. CHINA	96 - 125	22
A. Major political and economic developments	96 - 102	22
B. Programme progress and trends	103 - 115	23
1. Health and nutrition	104 - 105	23
2. Basic education	106 - 107	24
3. Women in development	108	24
4. Child development	109	25
5. Childhood disabilities	110 - 111	25
6. Disadvantaged areas	112	25
7. Evaluation	113	25
8. Operations and management	114	25
9. External relations	115	26
C. Inter-agency co-operation	116 - 120	26
D. Strategies for the 1990s	121 - 125	27

I. EAST ASIA AND PAKISTAN REGION

A. Regional overview

1. Throughout the East Asia and Pakistan region the situation of women and children and their access to services during 1989 were influenced by a variety of national and international political, economic and environmental events. Overall, it was a year of government continuity and modest economic growth, which in most countries was accompanied by improvements in the health and educational status of women and children. However, high population growth, environmental degradation, inequity in access to services and an overall increase in the number of families below the poverty line remain challenges for the 1990s.

1. Major political developments

2. Throughout 1989, political events in south-east Asia were dominated by the situation in Kampuchea. The Jakarta Informal Meetings on Kampuchea, begun in July 1988, continued and were followed at the end of July 1989 by the Paris Conference on Cambodia which aimed at negotiating a political settlement. The 19-member Conference, which began with considerable optimism, suspended its work after a month of negotiations.

3. In the Lao People's Democratic Republic, the first national elections, held in March 1989 under the Lao People's Revolutionary Party, resulted in a new Supreme People's Assembly. In the Philippines, the election cycle of the Aquino administration was completed in May 1989 with the election of 280,000 local council members in the country's 42,000 barangay (small municipalities), supporting the government policy of decentralization. The Union of Burma officially changed its name to the Union of Myanmar in May 1989. In March 1989, the Government published a draft election law announcing national elections in May 1990.

4. Political instability, exacerbating economic difficulties, continued in several Pacific island countries, and human rights continued to be a divisive issue in several countries. In Myanmar, primary, middle and secondary schools were re-opened in September 1989 after being closed for over a year. High schools and colleges have yet to re-open.

2. Economic trends

5. Economic growth in the region during 1988 and 1989 was variable, with a number of countries achieving a growth in the gross domestic product (GDP) of over 7 per cent, while others exhibited high inflation and economic stagnation. The Thai economy continued to perform well, with a projected GDP growth of 9.5 per cent. Projections for Malaysia and the Republic of Korea showed a slight decline from their high levels of growth between 1986 and 1988. Growth in the Philippines exceeded the 1988 government target and is projected at 6.5 per cent between 1989 and 1990. Growth rates for Indonesia and Pakistan continued to be above those of most countries in the region. Pakistan maintained a 5.8 per cent

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growth rate and Indonesia 4.2 per cent. Myanmar has a projected GDP growth rate of 3.4 per cent for the 1989/90 fiscal year and Viet Nam reported a 5.5 per cent increase in production for 1988, with a target of 7.6 per cent for 1989. The economies of the Pacific island nations continued to perform poorly, exhibiting minimal or negative growth rates.

6. Economic growth in several countries was affected by special circumstances. Bangladesh continued to recover from devastating floods and has a projected growth rate of only 2.5 per cent for 1989. In Papua New Guinea, disputes between the Government and landowners closed the Bougainville copper mine, which provides over half the country's export earnings. This has seriously affected the Government's ability to maintain health and educational services. In Thailand, legislation was passed to ban all logging following floods caused by massive deforestation. Timber exports from Kampuchea, the Lao People's Democratic Republic and Myanmar have increased significantly.

7. Economic restructuring was undertaken in several countries. In Viet Nam, the National Assembly approved economic reforms that opened the system to more international contracts and steps were taken to increase the production of food, staples, consumer goods and exports. Reforms are being implemented in banking and agricultural taxation. In the Lao People's Democratic Republic, economic reform has encouraged the expansion of economic activity within the private, service and industrial sectors. Increased agricultural production has been encouraged in Kampuchea by the restoration of private land-holdings and a reduction in collective farming. Trade liberalization, privatization and a greater role for market mechanisms were announced in Myanmar, but effective implementation has not yet taken place.

8. Inflation was a major problem in several countries in the region, most particularly Viet Nam and Myanmar. In Myanmar, inflation reportedly reached 500 per cent. In Bangladesh, Fiji, the Lao People's Democratic Republic and Pakistan, inflation rates were around 10 per cent. It is anticipated that higher wages and fiscal deficit in the Philippines will drive the rate to 10 per cent or more before the end of 1989.

9. External debt remained a major challenge to several countries. The Philippines continued to pay 45 per cent of the national budget to debt servicing, although in 1989 the Government rescheduled a debt of \$9 million and negotiated new credit with commercial banks. Indonesia's debt service ratio has increased over recent years to 36 per cent of the national budget. Myanmar's economy was crippled by massive debt and the country remains on the verge of bankruptcy. The delivery of social services in Myanmar was further reduced by the withdrawal of assistance from a number of bilateral donors. Declines in external debt are projected for Pakistan, Malaysia and Thailand.

3. Poverty

10. Poverty in the region, assessed in terms of caloric requirements or composites of all basic requirements, has declined in most countries during the 1980s. In Bangladesh, the proportion of the rural population below a designated minimum caloric threshold declined from 74 per cent in 1982 to 51 per cent in 1986. In Indonesia, using a poverty indicator that includes food and non-food necessities, the percentage of poor declined from 28.6 per cent in 1980 to 21.6 per cent in 1984. In peninsular Malaysia, the incidence of poverty declined only slightly from 18.4 per cent of the population in 1984 to 17.3 per cent in 1987. In the Philippines, the proportion of families below the food threshold was reduced from 59.3 per cent in 1985 to 49.5 per cent by 1988. In Thailand, the overall proportion of poor declined from 30 per cent in 1976 to 23 per cent in 1981, but following low agricultural prices, rose to 29.5 per cent in 1986. In the Republic of Korea, the percentage of the population in absolute poverty decreased from 40 per cent in 1965 to only 6 per cent in 1988.

11. Despite dynamic economic growth in much of south-east Asia, income distribution has remained highly skewed, and in most countries the rich have become richer at the expense of the poor. In Bangladesh, the relative share of income of the poorest 40 per cent of the population increased only slightly. In Malaysia the poorest 40 per cent of the population received 13.8 per cent of the national income - an increase of only 1 per cent since 1984. In 1988, in the Philippines, the poorest 40 per cent of the population received 14.3 per cent of the national income, while the richest 20 per cent received 51.8 per cent. In Thailand, rapid economic growth has been accompanied by increased maldistribution of income. Between 1980 and 1988, the wealthiest 20 per cent of the population increased their share of national income from 50 to 56 per cent.

B. Programme progress and trends

1. Child survival and development priorities

12. There was marked progress in child survival in East Asia and the Pacific during the 1980s, with reductions in the infant mortality rate (IMR) and increases in the coverage of three doses of combined diphtheria, pertussis and tetanus (DPT3) vaccine in all countries. Between 1980 and 1987, reductions in IMR ranged from 4 per cent in Myanmar to 27 per cent in Thailand and the Philippines, with almost all countries registering declines of over 10 per cent. Coverage of DPT3 increased from 1 to 71 per cent in Indonesia, from 3 to 64 per cent in Pakistan and from 47 to 79 per cent in the Philippines.

Progress towards universal child immunization

13. Progress towards universal child immunization (UCI) continued to be rapid in most countries in the region (see table below). The Marshall Islands, the Republic of Korea, Thailand and the Philippines have virtually achieved UCI. Indonesia and Pakistan, which have initiated planning and action for sustainability, appear likely to achieve UCI by 1990. With UCI in sight, efforts in Malaysia have

slackened, reportedly because of a successful hepatitis B immunization drive. However, an increase in defaulter tracing and the introduction of flexible clinic schedules make it likely that UCI will be achieved in 1990. Bangladesh and Myanmar, which were further behind, have strengthened their UCI infrastructure and intensified social mobilization efforts. Throughout the region attention is being paid: (a) to improving access to services in low coverage areas; (b) to reducing drop-out rates between the first and third doses of DPT and the oral polio vaccine (OPV); and (c) to accelerating the strategy of "immunization at every opportunity".

Immunization coverage

Country	Year	Percentage of infants immunized with				Percentage of pregnant women immunized with TT2 c/
		BCG a/	DPT3	OPV3 b/	Measles	
Bangladesh	1988	26	19	19	15	32
Democratic People's Republic of Korea	1989	99	94	97	96	-
Indonesia	1988	81	71	73	64	37
Lao People's Democratic Republic	1988	27	17	17	19	5
Malaysia	1988	96	72	72	52	50
Myanmar	1988	44	34	27	30	29
Pakistan	1989	80	73	73	61	26
Papua New Guinea	1988	80	48	48	46	57
Philippines	1989	95	79	78	77	37
Republic of Korea	1988	93	95	94	86	-
Thailand	1989	94	84	84	67	70
Viet Nam	1988	76	70	70	66	8

Source: 1989 UNICEF annual reports.

a/ Anti-tuberculosis vaccine.

b/ Three doses of OPV.

c/ Two doses of tetanus toxoid.

14. In Myanmar, increases in coverage have been hampered by political unrest and continuing instability throughout much of the country. In Bangladesh, rapid increases in coverage have been disrupted by the aftermath of the 1988 floods and the drought of 1989. Problems still persist in the Lao People's Democratic Republic, where extraordinary efforts will have to be made to achieve significant protection for women and children.

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15. Coverage increased rapidly in the Republic of Korea and Viet Nam, where UCI is likely to be achieved in 1990. However, problems regarding the quality and efficacy of immunization techniques and the quality of the cold chain need to be addressed. The immunization of women with tetanus toxoid will require increased efforts. In Viet Nam, vaccine production, which will commence in 1990, will demand special attention.

Control of diarrhoeal diseases

16. As one of the leading causes of infant mortality and morbidity in the region, the control of diarrhoeal diseases (CDD) continued to receive considerable attention. Although improved treatment has led to a decline in mortality, the frequency of episodes has not responded to intervention, which highlights the need for a multifactorial approach. Important initiatives in this area have been undertaken in Bangladesh, Papua New Guinea, Thailand and Vanuatu, where CDD programmes have been integrated with water and environmental sanitation and health education.

17. Oral rehydration therapy (ORT) continued to be vigorously promoted by UNICEF, and most countries in the region have now established national CDD policies that incorporate training in ORT and the use of home-produced rehydration solutions. However, in many countries, the impact of training has been disappointing. In Thailand, only 20 per cent of mothers use oral rehydration salts (ORS), although 70 per cent have access to them. In Bangladesh, only 17 per cent of diarrhoea episodes were treated with ORT, although in 90 per cent of households someone had been trained in control measures. However, in Myanmar it was reported that 62 per cent of rural women were aware of ORS and 42 per cent used the salts correctly.

18. The excessive and inappropriate use of antibiotics continued in some countries. This demands attention as Bangladesh reported increasing drug resistance to some pathogens.

19. Experience with the local production of ORS varied. Pakistan was self-sufficient, Myanmar produced 60 per cent of its requirements, Viet Nam 18 per cent and Bangladesh less than 1 per cent of its calculated needs. In response to considerable demand, the Philippines was considering the local production of ORS.

Water and environmental sanitation

20. Most countries in the region have strengthened links between water and environmental sanitation programmes and those for CDD. This provided an opportunity to strengthen primary health care (PHC) and to involve women in the planning and implementation of water supply maintenance and education in Bangladesh, Indonesia, Kampuchea, Pakistan and the Philippines. Cost recovery was introduced in programmes in Bangladesh, Kampuchea, Myanmar and Viet Nam. However, the poorest communities in most countries may need financial assistance to meet their water needs.

21. Most programmes have emphasized appropriate technology using manual well drilling, the rehabilitation of traditional wells and the use of local materials and equipment, which augurs well for increased coverage. Social marketing to link the provision of water to environmental sanitation and hygiene was widely practised.

22. Social mobilization in Bangladesh has led to a high demand for water, and communities are now willing to buy spare parts for hand-pumps. The installation of 22,522 public tube-wells has brought the average coverage to 199 persons per operating tube-well. The programme emphasizes sanitation and hygiene while at the same time satisfying the demand for water. However, the incidence of diarrhoea has not declined, and greater efforts are needed to supply potable water. In Myanmar, access to potable water has reached 30 per cent in urban areas and 38 per cent in rural areas.

23. Sanitation coverage has improved throughout the region. In Bangladesh, coverage increased by 50 per cent in 1988-1989, but still remains at a very low 5 per cent. In Myanmar, 30 per cent of rural and 35 per cent of urban households have latrines. In Indonesia, 22 per cent of the population have access to latrines and satisfactory waste disposal. The demand for latrines has been low in Kampuchea where the programme achieved only 10 per cent of its target. Social marketing efforts need to be intensified.

Acute respiratory infections

24. Acute respiratory infections (ARI) are an important cause of child mortality and morbidity in the region. In the Philippines, they cause 55 per cent of deaths of children under five years of age, and in Bangladesh, it is estimated that each child has eight to nine episodes a year.

25. Most programmes are at an early stage of development and focus on case management. Policy decisions to equip basic health workers with antimicrobials for the treatment of pneumonia have been taken in Bangladesh, Myanmar and Thailand. Pilot projects have been launched in 13 Thai provinces where knowledge, attitude and practice (KAP) studies are also being undertaken to refine programme strategies. Progress in Kampuchea depends on strengthening the underdeveloped health infrastructure. Viet Nam has introduced cost recovery in its essential drugs programme and is linking the control of ARI to CDD. Two smoke-free, ventilated demonstration houses have been built in Papua New Guinea as a contribution to ARI control.

Safe motherhood

26. Safe motherhood initiatives, which include the training of traditional birth attendants in antenatal care, have been undertaken in most countries in the region. Pilot programmes in maternal and child health (MCH) care were launched in Kampuchea, the Lao People's Democratic Republic, Myanmar and Thailand. In Indonesia, women have access to pre-natal care through the integrated health service delivery posts (posyandu), which are now found in 85 per cent of Indonesian villages. In the Philippines, the use of home-based mother's record cards was initiated for women identified as having high-risk pregnancies.

27. In Thailand, efforts were concentrated in high-risk areas. In Kampuchea and the Lao People's Democratic Republic, the success of MCH activities was hampered by poor infrastructure.

2. Nutrition

28. Undernutrition in young children remained a widespread problem in many countries in the region. The predominant nutritional activities were growth monitoring, the promotion of breast-feeding, food and nutrition surveillance and family food production. Access to nutrition information and education improved throughout the region, but the prevalence of undernutrition gives cause for concern.

29. Research in the Philippines underlined that poverty was a powerful impediment to nutrition improvement. In recognition of this, Pakistan is launching a programme of food subsidies and school feeding. Thailand has continued a small food subsidy for children suffering from severe malnutrition.

30. Growth monitoring and promotion were pursued in all countries, although implementation problems still exist. In Indonesia, 85 per cent of villagers have access to growth monitoring services, but the rate of utilization is only 47 per cent. Efforts are also being made to improve the quality of services since on average only 20 per cent of children show positive growth. Growth monitoring and promotion services in Myanmar now reach 65 per cent of villages and 83 per cent of townships. Bangladesh, Thailand and Viet Nam are field testing redesigned growth charts. The first two countries are expected to modify the management of their growth monitoring and promotion activities following the completion of reviews currently being conducted.

31. Control activities for iodine deficiency disorders (IDD) improved in the region. Programme managers from the Democratic People's Republic of Korea, Indonesia, Kampuchea, Myanmar, the Philippines, Thailand and Viet Nam participated in an interregional workshop where plans of action to improve control were drawn up or refined. It was emphasized that social marketing was a weak aspect of most programmes. National committees were established in Bangladesh, Myanmar and Thailand.

32. The production of iodated salt increased, and efforts are now being made to increase production further and to improve quality. In Bangladesh, which produces only 5 per cent of its iodated salt needs, legislation requiring the iodation of all salt was enacted and all 200 salt producers were provided with free iodation equipment. In the Lao People's Democratic Republic, iodated salt production supplies only 12 per cent of the estimated need.

33. A preliminary assessment of the IDD situation in the Democratic People's Republic of Korea revealed a well-established practice of distributing cultivated seaweed to pregnant women in IDD-prone areas. This is estimated to have supplied about half the iodine requirements.

14. Iodine supplementation through the administration of lipidol was implemented in Bangladesh, Indonesia and Thailand and on a smaller scale in Myanmar. Similar programmes will soon be implemented in the Democratic People's Republic of Korea, Kampuchea and the Lao People's Democratic Republic. Staff shortages in Pakistan have slowed progress there.

15. The problem of vitamin A deficiency was pursued through the administration of high-dose vitamin A in Bangladesh, Indonesia, Myanmar, Pakistan and Viet Nam. Bangladesh experienced a 2 per cent decline in night blindness and is now promoting the family production and consumption of vitamin A-rich foods. Night blindness also declined to a prevalence of 0.8 per cent among children and breast-feeding women in the Philippines. Vitamin A deficiency is being mapped in Myanmar and Viet Nam prior to designing intervention programmes. A two-year study in Viet Nam revealed an important correlation between vitamin A deficiency, ARI and undernutrition.

16. Breast-feeding continued to decline in the region and gives rise to considerable concern. In Pakistan, the number of children breastfed at 12 months of age declined from 78 per cent in 1980 to 51 per cent in 1988. A similar decline was also recorded in the Republic of Korea. The promotion of breast-feeding is being actively pursued in many countries, some of which have enacted legislation to control the marketing of breastmilk substitutes. The implementation of the legislation needs to be more closely monitored as milk companies persistently attempt to circumvent it. Pakistan has formulated a breast-feeding policy for health facilities. KAP studies are being undertaken in several countries as a basis for improving social marketing strategies.

17. Family food production programmes continued in many countries, and in Kampuchea and Viet Nam they formed part of the national strategy for agricultural diversification and household food security. An evaluation of family food production in the Philippines found that income-earning opportunities were a crucial factor in determining the success of gardening activities.

18. Food and nutrition surveillance is an important component of several country programmes. In Thailand, the system used to monitor children's weights is being expanded to include other socio-economic variables and is expected to improve the effectiveness of the Government's anti-poverty programmes. Viet Nam and the Philippines are initiating food and nutrition surveillance systems based on existing but currently unrelated data.

3. Progress report on acquired immunodeficiency syndrome (AIDS)

19. The number of persons in the region infected with AIDS increased significantly in 1989, with 9,473 cases reported by August. The majority (9,027) were recorded in Thailand. The actual number of persons in the region infected with the human immunodeficiency virus (HIV) is likely to be higher than officially reported, due partly to national sensitivities and partly to the time delay between national mobilization efforts and accurate prevalence surveys.

40. Most Governments have established national AIDS committees in co-operation with the World Health Organization (WHO) to develop national plans to prevent the disease, and most have adopted educational campaigns, particularly directed to high-risk groups. Training programmes for health personnel, counselling services and improved monitoring and surveillance were reported by almost all countries.

41. Owing to the growth of AIDS transmission within the heterosexual community and rising rates of HIV infection among women, which increases the risk of perinatal AIDS, UNICEF will focus on advocacy and social mobilization efforts and will support interventions aimed at preventing perinatal AIDS.

4. Women's activities

42. During 1989, UNICEF continued to support programmes directly benefiting women, such as training, literacy, income-generating activities and research studies on women.

43. Women in Kampuchea were trained in fruit and vegetable preservation and processing, the preparation of palm sugar, the use of fuel-saving stoves and raising silk worms. In Viet Nam, the Women's Union continued to help promote motherhood training through the use of videotapes, newspapers and booklets. In one province in the Republic of Korea, training in home-care nursing aids was given to low-income women and expansion is planned. In Pakistan, six master trainers were trained in entrepreneurship, giving rise to a pilot urban entrepreneurial/self-employment project in Punjab and a series of training workshops for women. Community group leaders in Bangladesh received training in social development with the Grameen Bank project. Child survival and development (CSD) was a major component of the training. Pictures of ORS messages were printed on the covers of 100,000 loan passbooks.

44. In Thailand, 400 women from 20 cities were trained in income-generating skills and a model for granting credit facilities to women's groups was formulated with support from UNICEF and a local non-governmental organization (NGO). New projects on promoting women's roles in village planning and improving household economic security were begun in six Thai sub-districts, and a multisectoral task force was established to improve existing enterprises and create new ones for disadvantaged rural women. In Papua New Guinea, women's income-generating needs were identified.

45. The low rate of female literacy in many countries in the region remained problematical. In almost all countries, girls were more likely than boys to be illiterate and to drop out of school early. In Bangladesh and Pakistan, female literacy still has low priority, and in some provinces less than 4 per cent of women are literate. UNICEF supported Bangladesh in its efforts to provide legislation for universal primary education. In Kampuchea, the Women's Association continued to produce booklets for neo-literate women that focused on child survival, women's health and income-generating activities and which were distributed to 200 communes providing access to 500,000 women. In 1989, members of the South Asian Association for Regional Co-operation, which includes Bangladesh and Pakistan, declared 1990 the Year of the Girl Child, which will highlight the issue of female education.

46. Research into women's roles and health status was conducted in several countries. In Pakistan, provincial profiles of women were completed in two provinces and those for the remaining provinces are planned to be completed in 1990. Information on financial, education, health and legal issues relevant to women was collected and disseminated through handbooks, newsletters, workshops and grass-roots-level meetings. In Myanmar, a study on the situation of women in urban, peri-urban and rural areas, and another on maternal nutrition, energy balance and use of time, were completed and will be used to prepare the situation analysis.

47. Women's issues have been incorporated as an integral component of UNICEF-assisted programmes in Bangladesh, Indonesia, Pakistan, the Philippines and Viet Nam. In the Lao People's Democratic Republic and Viet Nam, women's unions have played an important role in strengthening CSD activities. In Indonesia, Family Welfare Movement volunteers served as family welfare workers and helped to promote the family use of posyandu.

5. Urban services

48. Urbanization continued to be rapid in almost all countries of the region. Over 60 per cent of the population of the Republic of Korea already live in urban areas. By the year 2000, most of the larger countries of the region will have at least 40 per cent of the population living in towns. Even in predominantly rural Bangladesh, it is estimated that the urban population will increase from the current level of 19 per cent to 27 per cent by the year 2000. In most of those countries wealth is concentrated in the urban centres. However, cities also exhibited great disparities in income, as they hosted increasing proportions of their countries' poor. In Bangladesh, it is estimated that 56 per cent of the urban population live in poverty. In Myanmar, it was the urban poor who were most affected by inflation and disruption in the marketing of food.

49. The provision of co-ordinated services for the children of the urban poor has proved to be particularly difficult. In Pakistan, the Philippines and Thailand, UNICEF has supported urban community organization through training community level workers and volunteers. Evaluations indicated concrete gains in hygiene and sanitation in cities of the Sindh province of Pakistan and increases in immunization coverage in project cities of the Philippines and Thailand. In some countries, the labour-intensive nature of community organization and the lack of national policies of the urban poor have made it impossible to move from pilot projects to national coverage. In Bangladesh, UNICEF and other donors are supporting a study of the urban poor, which should contribute to the development of national urban policies and strategies to alleviate their situation. Thailand is applying its basic minimum needs approach to programme planning and development in municipalities. In the Philippines, the Presidential Commission on Urban Poor established a committee of all relevant government agencies to co-ordinate programmes.

6. Children in especially difficult circumstances

50. In May 1989, the NGO, Childhope, organized the Asian Regional Conference on Street Children at Manila. Most countries in the region participated, and one outcome of the meeting was the establishment of a regional network for street children to be supported by the Childhope regional office at Manila. The network will facilitate information exchange among all the NGOs and government agencies working on the problem of street children and will help to prepare situation studies or develop projects on street children in the region.

51. The new country programme for Thailand has a project for supplementary funding for working and street children which brings together the Ministries of Education, Labour and Social Welfare, the National Youth Bureau and the National NGO Council for Child and Youth Development.

52. The UNICEF-supported National Seminar on Child Abuse and Neglect in the Republic of Korea resulted in the formation of a national association to combat the problem. The Government of Pakistan has undertaken a nation-wide study on the problem of child labour. Country offices in both Bangladesh and Indonesia have incorporated situation studies on working and street children in the next country programme. The Philippines office has developed separate projects for supplementary funding for working children and children in armed conflict. The Philippines children in especially difficult circumstances (CEDC) programme, which evolved from the urban basic services programme, provides a model for addressing the problems of urban children and will be examined in a case study supported by the International Child Development Centre at Florence, Italy.

7. Education and early childhood development

53. It will be some time before the goal of universal primary education is reached in the region. Illiteracy, most particularly among women, remained high in some countries and the problem of drop-outs, repeaters and low enrolment persisted in most of the region. Poverty and slow national economic growth continued to influence school attendance. However, despite severe economic limitations, Kampuchea, the Lao People's Democratic Republic and Viet Nam have reached almost full primary enrolment. In the Philippines, improvements in enrolment have continued, but are offset by high drop-out rates (there were 3.2 million out-of-school children in 1989). Basic education needs in Bangladesh were not met. Drop-out rates were high, with only 14 per cent of primary students reaching fifth grade within five years. Political instability and the closure of all schools have been major set-backs in Myanmar.

54. In Pakistan, there is now a political commitment to provide better education for the disadvantaged and for girls. Between 1986 and 1988, total primary school enrolment increased from 44 to 63 per cent and female enrolment rose from 32 to 46 per cent. In Bangladesh, UNICEF supported an experimental pilot scheme of "satellite schools" aimed at providing the rural poor and females with access to education. To date, the results have been encouraging. Small-scale experimental educational programmes were undertaken in Indonesia, Malaysia, the Republic of

Korea and Thailand. Indonesia reported that income-earning activities appeared to prevent high drop-out rates. The Thinking Ability Development Project undertaken in the Republic of Korea showed improved cognitive skills development of Korean children. The challenge of those programmes is in going to scale.

55. Throughout 1989, UNICEF continued to focus attention on improving the quality of education through curriculum development, the production of teaching and learning aids and improvements in teacher training. In Viet Nam, classroom equipment and supplies were provided and 100-week and 120-week curricula were tested. In Kampuchea, the Lao People's Democratic Republic, Myanmar and the Pacific island countries, UNICEF focused particular attention on the provision of water and sanitation facilities, the installation of equipment for technical workshops and the supply of local materials for the construction of community-built schools. In Thailand, UNICEF supported the Foundation of Life-Long Education and the Department of Non-Formal Education to produce a series of educational films on the environment.

56. In many countries, UNICEF supported the incorporation of health and nutrition education into school curricula and teacher training. In the Solomon Islands, a comprehensive four-year plan of action was developed to integrate nutrition into the non-formal education curriculum. In the Lao People's Democratic Republic, MCH care and nutrition education were included in the readers and training material for the adult education programme. In Indonesia and Thailand, information on preventable childhood diseases was disseminated to primary schools and literacy centres.

57. Further positive trends included UNICEF success in attracting new partners from the development agencies and NGOs to support education initiatives. The Joint Australian NGO office in Kampuchea has agreed to fund the expansion of teacher-training institutes, while in the Philippines, the Canadian International Development Agency (CIDA) has agreed to fund UNICEF projects in Mindanao. In Bangladesh, linkages have been established between NGOs and the Government in curriculum development and materials preparation.

58. Facts for Life is being incorporated into primary education and non-formal literacy activities in Bangladesh, Indonesia, the Philippines, the Republic of Korea and Thailand. In Thailand, it is included in a popular weekly student magazine, and in Indonesia, it will be incorporated in a series of rural radio programmes. The Korean version of Facts for Life is presented regularly in a leading Seoul newspaper.

59. Early childhood development activities were highlighted as an important component of assistance in almost all countries in the region. In the Democratic People's Republic of Korea and in Pacific island countries, UNICEF support is still required for training professionals in pre-school education and for the development of curricula and teaching materials.

60. Innovative ways of improving the quality of early childhood development and education were undertaken in many countries. In the Philippines and Thailand, children's stories and songs are being based on local folklore. In Thailand,

mobile services for early childhood development introduced early stimulation activities to the most deprived and remote communities. Early childhood development activities are integrated in the CSD education services in Indonesia, in MCH activities in Malaysia and in the integrated nutrition and health activities in formal day-care centres in Viet Nam.

61. The Republic of Korea pioneered a package of educational programmes for parents and young children. An evaluation showed significant positive changes in the physical environment, in the availability of play materials in the variety of daily stimulation and in improvements in mothers' sense of responsibility.

62. With UNICEF support, many countries in the region are preparing national goals to present to the World Conference on Education for All to be held at Bangkok in March 1990.

8. Goals and strategies for the 1990s

63. In May 1989, senior regional UNICEF staff met with nine distinguished Asians in a two-day regional consultation on strategies for children and development in the 1990s. They discussed priorities for development in Asia in the coming decade and examined the development experience of children in Japan, Thailand and Sri Lanka. It was agreed that many important development issues were now international in character. The problems of poverty, environment and population were highlighted, and it was stressed that those issues must be taken into account in any regional, global or UNICEF strategy for children in the 1990s. Concern was expressed regarding violence and the impact on children of the breakdown of family life and cultural values. The increasing economic disparities within countries were also highlighted.

64. It was noted that child survival was no longer a policy priority for those Asian countries that had lowered infant and young child mortality rates. While further gains were still possible, attention in the coming decade must be on the development and protection of children.

65. The regional consultation recommended the following priorities for development in the 1990s: (a) investment in human resources, starting with children; (b) increased attention to the need for a viable economic base to sustain increased investment in human development; and (c) support to grass-roots institutions to promote sustainable community development.

66. While the panel endorsed the goals and strategies proposed by UNICEF, it was suggested that they should be refined and adapted to the Asia and Pacific context. Further strengthening of goals was called for in the areas of early childhood development, education, children in difficult circumstances and women in development. UNICEF was urged: (a) to encourage countries to assess the need for the social education of children; (b) to monitor the safety and well-being of children who were exposed to war or other serious violent situations; (c) to assist further with the collection, analysis and dissemination of social indicators; (d) to advocate with Governments to allocate more prime broadcast time to CSD and

women's development issues; and (e) to ensure the selection of well-qualified staff to allow more effective responses to complex child survival, development and protection problems in the 1990s and beyond.

67. In some countries, UNICEF is already associated with efforts to strengthen policies and plans for children. In Thailand, support is being given to the National Youth Bureau of the Prime Minister's Office to develop a 20-year perspective plan for children and youth as an input for the country's Seventh National Economic and Social Development Plan. In Bangladesh, the joint UNICEF-Government Advisory Group organized a national workshop on strategies for children in the 1990s. The new country programme of co-operation for Indonesia, which is being submitted to the 1990 session of the Executive Board, builds on and aims to further strengthen the country's policies for the survival and development of children. In Malaysia, the Socio-Economic Research Unit of the Prime Minister's Office is undertaking a survey and analysis of the country's achievements in CSD in the 10 years since the International Year of the Child. The study will serve as a basis for reviewing and redefining policies and strategies for the Malaysian child in the 1990s.

9. Supplementary funds and the use of global funds

68. During 1989, the total amount of supplementary funds received and pledged by 20 donors for 11 countries in the region was over \$29 million. Projects receiving supplementary funds were expanded programmes on immunization (EPIs), water and sanitation, nutrition, CDD, women in development, emergencies, disability prevention, CEDC, education and essential drugs. In most countries, implementation rates of supplementary-funded projects were very high - 100 per cent in Bangladesh, 89 per cent in Viet Nam and 83 per cent in Indonesia.

69. Papua New Guinea received \$150,000 from the Under-Five Mortality Reduction Fund for EPI, while Indonesia received nearly \$2.5 million and utilized the funds for EPI, child survival projects with religious NGOs and special assistance to East Timor.

C. Regional services

1. Planning, evaluation and monitoring services

70. The East Asia and Pakistan Regional Office (EAPRO) served as a focal point for exchanging practical experience on policies and programmes for children among countries of the region and the rest of the world. In collaboration with country offices and Governments, EAPRO organized 14 study tours, which included visiting groups from South Asia, Burundi, China, Ethiopia, Mozambique, the Middle East and Morocco, in the areas of PHC, urban development, area-based integrated rural development, education, childhood disability, CEDC, water and sanitation and early childhood development.

71. EAPRO organized a four-week regional training workshop for 24 participants from seven countries on social indicators for children and women jointly with the Statistics Division of the Economic and Social Commission for Asia and the Pacific (ESCAP). The workshop aimed at improving reporting on social concerns; enhancing the awareness of policy makers, planners and administrators; and improving monitoring changes in the situation of children and women.
72. The regional office library continued to collect, assemble and disseminate materials related to socio-economic development and child welfare and is currently developing library computer software to support in-house and regional programme activities and to facilitate the flow of information. The use of its facilities and resources doubled during 1989. Assistance was given to UNICEF country offices to develop special reference libraries.
73. During 1989, master plans of operation for countries in the region were consolidated for easier reference. A data base on important statistical information concerning mothers and children in Asia-Pacific countries was computerized. The library also supported the consultation on the strategies for the 1990s and is providing assistance for the World Conference on Education for All.

2. Regional nutrition services

74. Advisory missions were made to support programmes in Bangladesh, Pakistan, the Philippines and Viet Nam, and full nutrition programming services were provided to the Thailand programme.
75. Training was supported through participation in the development of a Bangkok-based regional training course in social statistics and initial arrangements were made for the introduction of food and nutrition surveillance in training programmes at the Statistical Institute of Asia and the Pacific at Tokyo. Work began on the production of a training and advocacy videotape on the selection of social indicators for food and nutrition surveillance.
76. The regional adviser participated in meetings at New Delhi and Seoul and contributed to the planning and analysis of programmes for the control and prevention of IDD and childhood undernutrition. In collaboration with New York headquarters, a workshop was held to review the experience of field-testing prototypes of a solar-powered electronic weighing scale.

3. Advisory services for urban services and children in especially difficult circumstances

77. Missions to support urban and CEDC aspects of new country programme preparations were carried out in Bangladesh, Indonesia and Thailand. Missions to advise on ongoing programmes were carried out in Pakistan and the Philippines. An adviser prepared a CEDC input and an EAPRO publication on urban PHC and participated in the Asian Regional Conference on Street Children, a training workshop on urban basic services at Colombo and a conference on managing urban development at the East-West Center in Hawaii.

4. Supply operations

78. In 1989, Supply Operations emphasized training and skills development of programme and supply staff in the region. Orientation and training in supply operations were given to staff from the Lao People's Democratic Republic, Malaysia, Myanmar and Viet Nam, and a mini-workshop was held in April 1989 for supply and programme staff working in Indo-China and Myanmar. Support was given to a supply and logistics workshop at Dhaka. A regional supply officer participated in the global supply/programme workshop at Lomé, Togo. Under the global trainee programme, a staff member has been assigned to the supply section of the regional office to train as a supply officer.

79. During 1989, Supply Operations took responsibility for the procurement and shipping of administrative supplies for all UNICEF offices in the region and was responsible for global procurement valued at \$8 million. Although, in comparison to the corresponding period last year, there has been a decrease in the value of purchase orders placed and shipped, the number remains high at 658 orders.

5. Administration, personnel and finance

80. The first regional finance workshop for the East Asia and Pakistan and South Central Asia regions as well as for the Sydney and Tokyo offices was held in Thailand in 1989. Staff training assistance was provided through workshops in Pakistan and the Philippines, and orientation, training and technical advisory support were provided to staff from Bangladesh, the Democratic People's Republic of Korea, the Lao People's Democratic Republic, Myanmar and Viet Nam, both in Bangkok and the country offices concerned.

81. With the global policy of discontinuing the virtual storage (VS) mini-computer, the Bangkok office has now implemented the finance modules of the personal computer global field support services system. The office will provide training in the use of the system as required.

6. External relations

82. Advocacy activities in support of the draft Convention on the Rights of the Child involved policy makers, parliamentarians, public and private sectors, NGOs and the mass media. Greater attention was paid to issues of child abuse, child labour and children in other difficult circumstances. Attention was focused on these themes not only by the international media, but also, increasingly and significantly, by national media personnel in several countries, particularly Indonesia, the Philippines and Thailand.

83. Many of the partners involved with advocacy for the Convention also participated in national initiatives to make the Facts for Life messages locally relevant. The State of the World's Children report, with its theme of the effects of debt on children, received above-average attention in the media.

84. The Regional Communication and Information Section assisted several country offices, particularly Kampuchea, the Lao People's Democratic Republic, Myanmar and Viet Nam, in coping with urgent demands for publications and audio-visual and presentation materials. Several offices successfully introduced desktop publishing technology into their work, resulting in cost reductions and quality improvements.

85. Julio Iglesias visited the Philippines and the Republic of Korea on behalf of UNICEF, and Goodwill Ambassador Audrey Hepburn visited Bangladesh and Thailand, with excellent results for advocacy and media coverage. Sports Ambassador Imran Khan was particularly successful in promoting health messages for children, not only in his native Pakistan but also in Bangladesh. The Executive Director's visit to the region was a significant support for the Hong Kong Committee for UNICEF and for the new programme of co-operation in Viet Nam.

86. In May 1989, the regional office held a three-day briefing for the Asia-based correspondents of the Inter-Press news service, followed by a workshop for 25 information and communication officers.

87. The most impressive increase in the region's greeting card operation sales was again recorded by the Hong Kong Committee for UNICEF, with a 50 per cent growth to 450,000 cards. Malaysia's sales rose by 46 per cent to 146,000 cards.

7. Regional personnel

88. The Regional Personnel Office supported country offices with advice and assistance on a variety of personnel issues ranging from counselling individual staff members to assisting offices with salary surveys, restructuring and staff training. As the United Nations moves to a new system of job classification for General Service staff, UNICEF offices in Indonesia, the Lao People's Democratic Republic, Malaysia and Singapore received support in introducing the new system. Particular emphasis was placed on training in the region and staff training workshops included those in Pakistan (management/administration/finance/personnel), the Lao People's Democratic Republic and the Philippines (performance appraisal system) and at the regional office (training of trainers).

8. Programme support communications

89. In March 1989, the regional adviser for programme communication support and training arrived at Bangkok for the start of a visit to Indonesia, Kampuchea, Malaysia, Pakistan, Papua New Guinea and Vanuatu to provide communication support for EPI and CDD programmes. Ongoing advice and support was also given to Myanmar and Viet Nam through correspondence and consultations with visiting staff. Assistance was provided to Papua New Guinea and Vanuatu in developing social mobilization strategies for CSD. Support was also given to the Thai programme.

90. Training was supported regionally through the development of a training module on communicating social indicators and participation in the regional training workshop on social indicators. Pakistan was assisted in the development of a

communication training module for community health workers. The regional adviser participated in the interregional information and communication workshop held in Thailand in May 1989 and served as a resource person at a workshop on producing and using communication materials held in Pakistan in November.

9. Inter-agency co-operation

91. During the year, collaboration among agencies of the United Nations Joint Consultative Group on Policy increased at the country level. In the Pacific island countries, the Philippines and Viet Nam, joint programme reviews have taken place or are being planned. In Indonesia, all relevant United Nations agencies contributed to the development of a new UNICEF-supported country programme and are now exploring ways to support collectively the Government's growing concern with poverty alleviation. In Pakistan, UNICEF participated in the initiative of the Resident Co-ordinator of the United Nations Development Department (UNDP) to bring the agencies together to review such issues as women's development, basic education, the national census and the environment.

92. In November 1989, a mid-term review of United Nations system programmes of co-operation was organized in Viet Nam. UNICEF and UNDP are working together there to promote programmes for the proposed Fourth United Nations Development Decade that address the issues of the environment, water supply, sanitation and women in development. UNICEF is actively participating in a series of UNDP sector reviews and visiting missions. In Bangladesh, UNICEF is collaborating with UNDP and the World Bank in a number of initiatives in water and sanitation, including the development of a modified Tara hand-pump for middle-depth use. In Thailand, UNDP, UNICEF, the United Nations Population Fund (UNFPA) and the United Nations Fund for Drug Abuse Control are working together in support of a highland development project.

93. In most countries of the region, planning for the World Conference on Education for All has resulted in regular meetings and informal working groups among the country and regional offices of UNICEF, UNDP, the United Nations Educational, Scientific and Cultural Organization (UNESCO), the World Bank and the Asian Development Bank (AsDB).

94. At the regional level, UNICEF co-operated with ESCAP in a number of areas. It participated in the ESCAP inter-agency task forces on women in development, youth activities, integrated rural development, human resources development and Kampuchean rehabilitation. It joined an ad hoc Expert Group Meeting on the Integration of Women in Technological Development and a regional meeting on youth development in Asia and the Pacific. UNICEF was represented at meetings of an ESCAP-sponsored steering committee of non-governmental agencies working inside Kampuchea and with the refugee population in border areas. The agency contributed regularly to WINAP, a quarterly ESCAP newsletter on women in development. At its forty-fifth session, ESCAP unanimously adopted a resolution on the proposed regional social development strategy towards the year 2000 and beyond.

95. UNICEF continued to support the International Baby Food Action Network regional office in Malaysia by providing funds for their International Forum on the Infant Feeding Crisis, held at Manila in early October 1989. UNICEF also supported publishing costs of the Asia-Pacific Academic Consortium for Public Health journal.

II. CHINA

A. Major political and economic developments

96. The tumultuous events in China in the spring and summer of 1989 not only made headlines all over the world, but may also have marked a watershed in the country's development for some time to come. The policy of reforms and the opening up of the past decade brought into focus multiple contradictions - contradictions between economic liberalization and ideological orthodoxy, traditional values and attractions of Western culture, the inequities of economic freedom and egalitarian socialist ethics, and the control of a monolithic political structure and the need for expressing the diversity of views in a period of social transition. The path chosen by the Government seems to be of unquestioned adherence to a course dictated by a conservative political line, reflecting a world-view that had been shaped more by the revolutionary struggle of the past than the ferment of change of the contemporary world. Meanwhile, the fundamental contradictions remain unresolved and continue to exert pressure on the society.

97. There have been public pronouncements regarding the continuation of economic reforms and opening to the world. At the same time, recent specific actions and policy statements indicate a strong emphasis on social and political stability, public order, adherence to ideology, political study in all work units and institutions leading to "unified thinking" and a stronger role for the State sector of the economy. Relegated to the background, at least for now, are an enhanced role of the market, price decontrol, separation of the party from the day-to-day functioning of the Government and economic enterprises, enterprise autonomy, diversity of expressions in the mass media and in creative arts and the right to hold and express dissenting political views. All of those features of political and economic liberalization had been slowly gaining ground in the last decade and now appear to be in retreat.

98. The overall high growth rate of the national economy continued during 1988 and the first half of 1989. With an 11.2 per cent growth of the gross national product (GNP) in 1988, the symptoms of a strained economy persisted. The official conservative estimate of the increase in the retail price index in 1988 was 18.5 per cent. Shortages in energy, transportation, industrial raw materials and construction materials contributed to inflationary pressure, unbalanced economic growth, unemployment and inefficiency.

99. On the positive side, in addition to the high overall growth rate, the industrial sector grew at a rate of 18 per cent in 1988 (with rural enterprises growing at a rate of 35 per cent). Grain production, however, showed a 2.5 per cent decline over the previous year.

100. The value of both exports and imports grew in 1988 by 20.8 per cent (to \$47.6 billion) and by 28 per cent (to \$55.3 billion) over 1987. The current account balance showed a small deficit of \$4.1 billion. Trade composition showed a continued growth of manufactured exports, non-grain food exports and growth in the share of trade with developing countries. Foreign debt in 1988 was \$40 billion, or about 13 per cent of GNP.

101. The impact of recent events is not yet fully evident in economic statistics, although it is sure to be major. Tourist earnings, estimated at \$2 billion a year, had almost totally dried up in the latter half of 1989. Major external loans and investments from bilateral, international and private sources have been suspended, at least for the time being, and the confidence of investors has been shaken. One beneficial effect will be the moderation of the rapid rate of growth of the economy, which the Government tried to achieve during the last two years without much success. The real growth in 1989 is still expected to be just under 10 per cent, and the inflationary pressure is expected to ease slightly compared with the previous year. The slow-down will ease inflation and imbalance in the economy, but it will aggravate unemployment problems in both rural and urban areas and the frustration of the population caused by unmet rising expectations for a better life that have spread in recent years.

102. The central government budget allocation and expenditures of the last two years have recorded only modest growth in nominal terms not enough to offset the effects of inflation. The allocation and expenditures for both 1987 and 1988 were largely in balance, although moderate deficit financing was resorted to in both years to compensate for the revenue shortfall. Combined allocations for health and education in 1987 and 1988 were 12 and 13 per cent, respectively, of the budget. The trends in budget allocation for the social sector showed no change in 1989. It should be noted that recurrent costs for social services in China are borne mainly by the subnational and local governments. The central budgets, therefore, give a partial picture of financing for social services. Unfortunately, information about budgetary trends at the subnational level are not available.

B. Programme progress and trends

103. In this final year of the 1985-1989 programme cycle, attention has focused on the completion of projects, including the full utilization of available funds, the evaluation of projects and the preparation for transition to the new five-year cycle beginning on 1 January 1990.

1. Health and nutrition

104. In the area of health and nutrition, the crowning achievement of the cycle was to reach the UCI goal, with national immunization coverage for four EPI vaccines surpassing the 95 per cent mark in 1988. Attention will now focus on reaching the universal coverage goal for each one of over 2,000 rural counties by the end of 1990. Steady progress has been made in MCH, especially in spreading the lessons of the model counties from 30 to 95 counties in all parts of the country. Drawing on

those experiences and lessons, a major MCH thrust is planned for the new cycle covering 300 designated poverty-stricken counties. If the same results in mortality and disease incidence reduction can be achieved in the 300 high-IMR counties as has been achieved in the model counties, a major stride will have been made towards reaching the national child survival and health goals, which surpass the global goals.

105. Other health and nutrition activities included training, research on specific disease problems, endemic disease prevention, child nutrition projects and health education. The adaptation and distribution of the Chinese version of Facts for Life was a multisectoral health education activity.

2. Basic education

106. Nine projects dealt directly with education. They were intended to assist in improving the quality of both teacher training for primary, pre-school and special education and reading materials, as well as in the development of teaching aids, science and math kits and educational toys, and to provide support for extra-curricular science education, especially in remote areas.

107. Assistance was given to eight normal universities, 17 secondary-level normal schools for pre-service and in-service teacher training of pre-school teachers, 23 normal schools for primary school teachers and three normal schools for training special education teachers. A major emphasis on in-service teacher training will continue in the next cycle, and will be complemented by support for the expansion of distance education methods. A new departure in the new cycle will be a project to strengthen primary education by supporting community teacher-parent groups in their efforts to improve the learning environment and performance in schools. Support for the production of reading materials, teaching aids and out-of-school science education in disadvantaged areas will continue. Such efforts are expected to contribute to achieving the goal of "education for all", especially universal primary education and its qualitative improvement.

3. Women in development

108. Activities focused on enhancing women's status, role and their participation in development, and included the training of women cadres, assisting teacher training and curriculum development for community-run pre-schools promoted by the All China Women's Federation and the training of women community extension workers in Tibet. The All China Women's Federation also managed social mobilization projects for EPI in three relatively disadvantaged provinces. The new cycle will also emphasize family education, women's literacy and the promotion of child rights.

4. Child development

109. During the last two years, the Child Development Centre of China has focused on the most vulnerable age-group of 0-3 years through applied research, training and the production of instructional materials. In the new cycle, the Child Development Centre of China will direct its efforts towards poor, remote and minority areas and in developing collaborative activities with the All China Women's Federation.

5. Childhood disabilities

110. Six childhood disability projects have been carried out in the current cycle: the orientation of welfare staff to community-based rehabilitation; a survey of childhood disability in eight provinces; exchange and study tours; intervention experiments in mental retardation; prevention and education in hearing impairment; and the publication of materials in Braille.

111. Activities in the new cycle will emphasize the development of a comprehensive approach to prevention, early detection, community-based rehabilitation and public education on childhood disabilities. Co-operative activities will include establishing resource centres and demonstration projects and strengthening capacities. Operational research and the demonstration of early screening and remedial activities will also be supported.

6. Disadvantaged areas

112. A basic services project in disadvantaged areas in two provinces was introduced after the mid-term review in 1987. Assessment of this initiative is still incomplete, but preliminary indications are sufficiently positive to justify a continuation of this approach in three other provinces in the new cycle. An additional six poor provinces in the western and south-western parts of the country are proposed as the beneficiaries of this approach through projects financed by supplementary funds.

7. Evaluation

113. Evaluations and studies were significant programme elements and their results have been used in shaping the programme for the new programme cycle. Formal and informal monitoring approaches have yielded good results in improving project quality and implementation.

8. Operations and management

114. Staff development continued to be a major focus, especially with regard to improving both the professional knowledge and English language skills of the national staff. Supply operations managed to alleviate past problems of backlog and weaknesses in tracking procurement and supply inputs. Full utilization of the

target arrival date ceiling in the last year of the programme cycle remained a source of concern, although it is expected that any significant slippage in supply delivery will be avoided.

9. External relations

115. Advocacy for children received significant support from the national media with the launching of the Chinese version of the State of the World's Children report, and various newsworthy events, such as the achievement of UCI goals and approval of the new country programme, provided the highlights. An international conference on the draft convention on the rights of the child was planned for November 1989. Publication of the Chinese version of Facts for Life through intersectoral collaboration was an important social mobilization event. The fund-raising atmosphere has been adversely affected by the present situation and will require special attention from headquarters. The promotion of greeting cards, set back somewhat by the current political situation, is still expected to show significant success.

C. Inter-agency co-operation

116. In health and nutrition, close working relationships continued with WHO, particularly in the areas of EPI, CDD, ARI, health education and information systems. The relationship with UNFPA developed rapidly in the past year in the course of joint planning of the MCH project for the new cycle. The initiation of an Inter-Agency Fund for Nutrition Surveillance project in China, with the support of the Sub-Committee on Nutrition of the Administrative Committee on Co-ordination, has resulted in an increase in interaction with WHO and the Food and Agriculture Organization of the United Nations (FAO) in the area of nutrition. Multiple links were also maintained with projects of other organizations.

117. A counterpart of the Joint Consultative Group on Policy was formed in China. UNICEF is presently involved in developing a collaborative project with the World Food Programme, UNDP and UNFPA in the province of Yunnan. The involvement of the All China Women's Federation and the Child Development Centre of China is likely to be considered to promote family and community education as well as an early child development component.

118. Collaboration with WHO and UNESCO has been important in launching the Facts for Life publication. It is expected that their collaboration will continue in efforts to adapt the messages to the primary school curriculum for a child-to-child and child-to-adult educational programme planned for 1991-1992.

119. UNICEF has been co-operating with several bilateral and multilateral organizations and NGOs in the areas of child development and childhood disabilities. The British Council and the Danish International Development Agency (DANIDA) have helped to organize orientation courses in early childhood development and to identify and support resource persons in child disabilities for training in China and abroad. Preliminary discussions have been held with DANIDA

about establishing revolving funds to help the disabled in China, and more recently, contacts have been established with the Save the Children Fund (United Kingdom) about joint action for the disabled. Rehabilitation International has provided assistance and documentation on a regular basis.

120. The four sponsoring agencies, as well as other collaborating organizations such as AsDB, have supported the country preparations for the World Conference on Education for All, with UNICEF serving as the focal point. It is expected that this collaboration will continue in the follow-up of the conference.

D. Strategies for the 1990s

121. Main CSD targets enumerated in the 1989 policy review for the Executive Board are expected to be reached. This favourable prospect, however, brings to focus the inadequacy of the discrete sectoral targets as the basis for formulating strategies for children which serve the 1990s and anticipate the twenty-first century.

122. As commendable as it is, on closer scrutiny, the shortcomings of overall national achievement become evident in at least three circumstances: (a) where policies and actions are required to transcend traditional sectoral responsibilities and where effective approaches call for a focus on the whole child; (b) in economically and culturally disadvantaged areas where provisions for basic services require concerted and co-ordinated government and community efforts rather than a reliance on the general prosperity of the communities to provide private substitutes for essential public services; and (c) in promoting the rights of children that recognize the individuality and human dignity of the child and help to fulfil the child's potential.

123. The national leadership seems to have recognized the problem. In September 1989, the Premier announced the decision of the Government to form a Leading Group under the State Council (the highest government organ) to co-ordinate the work in respect of children and youth.

124. The main strategy issue in the Chinese context is to develop a comprehensive system of responding as effectively as possible to the needs of the whole child. The following important aspects of strategy development will require attention: (a) the articulation and implementation of broad priorities, generally agreed upon with respect to objectives and targets, in a way to ensure that they are mutually supportive and that taken together they address the critical needs of children in a particular situation; (b) the development and introduction of a mechanism for identifying the critical survival and developmental needs of children in specific situations, the establishment of bench-marks of starting points in respect of key selected indicators and the tracking of the progress of these indicators; and (c) the adjustment over time and for specific geographical or population units of the mix of key objectives and targets that constitute a response system for addressing the critical needs of children.

125. A strategic step in developing an effective response system will be the establishment of a widely applicable, simple and culturally adapted system of monitoring the key elements of young children's development. In China, UNICEF proposes to devote its efforts in the coming years to exploring the prospects of a large-scale child development monitoring system linked with appropriate systems of responding to critical needs of children.
